COUNTY HEALTH DEPARTMI

No19794

IM-ROVEMENT PERMI' 3-5-5714 Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department." New Installation Septic Tank TRU Name: (owner) Property Location: SR# Repairs Nitrification Line Subdivision Lot# Tax ID #_ _ Ouadrant # ____ Lot Size: e 482 Ac Number of Bedrooms Proposed: _ Garage: Please note Change, In Basement with Plumbing: Water Supply: Public Public ☐ Well ☐ Community Side Line Set RACKS Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other _ Size of tank: Septic Tank: ______ gallons Pump Tank: _____ gallons exact length of each ditch and ft. ditches ft. depth of ditches Subsurface No. of depth of Drainage Field ditches French Drain Required: _ _____ Linear feet This permit is subject to revocation if site Signed: __ plans or intended use change. Environmental Health Specialist 103 301 DRIVE 90 15 10 STUB out Plumbing Shallow - Where Shown Run PVC Pipe From Tout Towards The Front where 18" pitch Dyothis con be structed And Maintained. NOTE Changes In Side Line Set Backs Meet Onsite Before Installing

DRIVE OR PARK ON SEPTER SYSTEM

H ETT COUNTY HEALTH DEPARTME AU ...ORIZATION TO CONSTRUCT

Authorization is hereby given to con Harnett County Health Department authorization shall be valid for a pe This authorization will be invalid if o	t, Improvement l riod not to excee	Permit # 9794 d five (5) years from the date	. This
Jimmy Picece			5050
Name		9/0 - 328 - 5257 Telephone #	
Address			
Property Location SR#		Road Name	
Veach Trec	o 47	3(45x54)	482 AC
Subdivision	Lot #	# Bedrooms Proposed	Lot size
	TYPE OF S	YSTEM	
[New Installation [] Repair Septic Tank Nitrification Lines Conventional Other			
[] Basement [] With Plumbi. Water Supply: [] Well Public - Septic Tank	Minimum Well Se Pump Ch	tback: 55 Ft.	
Number of fields # of lines per field Length of lines Ft.			
Width of ditches ft. Depth of ditches inches			
French Drain: Linear feet required Depth of gravel			
No wastewater system shall inspection by the Harnett Cour has been installed according to valid Op	nty Health Dep o the condition	partment has determined	that the system
Signature of Authorized Agent for Harnett Co	ounty	- 5 - 5 2 Date	