## HARNETT COUNTY HEALTH DEPARTM

## IM. ROVEMENT PERMI

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."

	HIZ Chaistran Light		
Subdivision Fones7	Tapels	Lot	# 23
Tax ID #		Quadrant #	
Number of Bedrooms Prop	posed:3Lo	t Size: 461 Acr	e
	Garage:		
Water Supply:  Well Distance From Well:	Public Community  ft.		
Type of system: Conv	entional Other	7 :	
	c Tank: 1000 gallons Pur		
	exact length of each ditch 75 ft.	width of ditches ft. di	epth of tches 18-20 in.
French Drain Required:	Linear feet		
This permit is subject to plans or intended use cha		Environmental Hea	Short @ 122 lth Specialist
	Part CON Repaire  OID ROAD BED  HOME B  LPP Repaire  VE		

KINGSDROOK CIRCLE

#03-5-5811

## HARNETT COUNTY HEALTH DEPARTMENT AUT RIZATION TO CONSTRUC

Authorization is hereby give Harnett County Health Depa authorization shall be valid f This authorization will be inve	ortment, Improvement for a period not to ex	nt Permit #_ ceed five (5)	19864 years from the dat	. This
Cambost Home		<b>P.3.3, ()</b>	OID 6	CZ 27/112
Name	<i>2,00</i>		Telephone #	33- 3292
Comfort Homes.  Name  P.O. BOX 369  Address	Clayton	N.C.	27520	
				1 12
/4/Z Property Location SR#			Christ	ran Light
	77	Various Valorius (Assertin	Koaq Name	
Forest Tracks Subdivision		# Red	5	1961
	, Lot #	# BCU	rooms Proposed	Lot size
[ New Installation [ ] Repa		F SYSTEM  Nitrificiation	on Lines	
/				
[   Conventional Other	[ ]Base	ement [ ]Wi	th Plumbine [ ] With	Out Plumbing
		. ,		ioni i minome
Water Supply: [ ] Well [ 1] Septic Tank	Public - Minimum Wel	ll Setback: _ p Chamber	5-51 Ft.	
Ĭ.	NITRIFICATION FIL	ELD SPECIF	ICATIONS	
Number of fields Z # 6	of lines per field	Length	of lines 75	řt.
Width of ditchesft	. Depth of ditches / 8	inche	es	
French Drain: Linear feet requ	nired Dept	h of gravel	<u> </u>	
No wastewater system inspection by the Harne has been installed accordance.	tt County Health	Departmentions of the	nt has determine e Improvement l	d that the system
Carnes & Marsha Signature of Authorized Agent for I	Harnett County	12-	10 - 0 Z Date	