HARNETT COUNTY HEALTH DEPARTM

IM. ROVEMENT PERMIT

Nº19903

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."

from the Harnett County Health Department."	
Name: (owner) Dany NORRI	New Installation Septic Tank
Property Location: SR#/	☐ Repairs ☐ Nitrification Lin
0 (-	
	Lot #
Tax ID #	Quadrant #
Number of Bedrooms Proposed: 3 (44435) Lo	t Size: 196AC
Basement with Plumbing: Garage:	
Water Supply:	
Distance From Well: ft.	
Following is the minimum specifications for sewage disposal systematical approval.	
Type of system: Conventional Other	
Size of tank: Septic Tank: Deptic Tank: Pur	
Subsurface Drainage Field No. of ditches are exact length of each ditch ft.	width of 3 depth of ditches ft. ditches by in.
French Drain Required: Linear feet	
	12/2
This permit is subject to revocation if site plans or intended use change. Signed:	of mars
plans of intended use change.	Environmental Health Specialist
SR III	119
MIN DIT	- GARAGE / 71
ONC ?	
27	BR - LOUVE
	3 BR JUNE
93 K	
Lee Ryp.	
	40
117	
(7,00+0)	

Maintain All Sit Back, Follow Contons

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HA TT COUNTY HEALTH DEPARTMEN AUL DRIZATION TO CONSTRUCT

Authorization is hereby given to cons Harnett County Health Department,	Improvement	Permit # 19907	. This
authorization shall be valid for a peri This authorization will be invalid if on Many	iod not to excee vnership, site pl	ans, or intended use change	ate of issuance. 2.
Name		Telephone	; #
Address			
Property Location SR#	121	Road Nan	
Pearly The	156	3 (44x35)	e Ybac
Subdivision	Lot#	# Bedrooms Proposed	Lot size
TYPE OF SYSTEM			
New Installation [] Repair [Septic Tank [Nitrificiation Lines			
Conventional Other [] Basement [] With Plumbing [] Without Plumbing			
Water Supply: [] Well [] Public - Minimum Well Setback:Ft. Septic TankPump Chamber			
NITRIFICATION FIELD SPECIFICATIONS			
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 be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system			
has been installed according to the conditions of the Improvement Permit and that a valid Operations Permit has been issued.			
Signature of Authorized Agent for Harnett Co	unty	//-26-02 Date	