03=5-6299

HARN T COUNTY HEALTH DEPARTM

Nº19741

IMPROVEMENT PERMIT

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."

Name: (owner) Andrew Jason Yarbough	New Installation	Septic Tank
Property Location: SR# 1566 Popes Loke Rd.	Repairs	Nitrification Lin
Subdivision Popes Lake 2	Lot	#
Tax ID #	Quadrant #	
Number of Bedrooms Proposed: 4	Lot Size: 1,21Ac	
Basement with Plumbing: Garage: [
Water Supply: Well Public Community	y	
Distance From Well:ft.		0 4
Following is the minimum specifications for sewage disposal sfinal approval.	system on above captioned p	property. Subject to
Size of tank: Septic Tank: gallons		
Subsurface No. of ditches 4 exact length of each ditch /00	width of de _ft. ditches ft. di	epth of tches 18 in MA
French Drain Required: Linear feet	1/	
	2/5/2003	~
This permit is subject to revocation if site plans or intended use change. Signed:		th Specialist
S. Lander of the Control of the Cont	Environmental Heal	uii Speciansi
*Maintain all required	ни, недави и выполнятии с очивом подпорожения подпочной подпочной подпочной подпочной подпочной подпочной подп	
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	143'	
	Road	Commentation of the Colone of State of
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HARN... I COUNTY HEALTH DEPARTM....T AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit #/974/ This authorization shall be valid for a period not to exceed five (5) years from the date of issuance. This authorization will be invalid if ownership, site plans, or intended use change.		
Andrew Javan Yarbrough Name 35 Lorine Ct. Angir , N.C. 27501 Address		
Address Ct. Angier, N.C. 27501		
Property Location SR# Popes Lake Road Name		
Popes Lake 2 / 4 /21Ac Subdivision Lot # # Bedrooms Proposed Lot Size		
TYPE OF SYSTEM		
[New Installation [] Repair		
[Conventional [] Other		
[] Basement [] With Plumbing [] Without Plumbing		
Water Supply: [] Well [Public Water Supply Minimum Well Setback: Ft.		
Septic Tank /000 fel Pump Chamber		
NITIRFICATION FIELD SPECIFICATIONS		
Number of fields/ # of lines per field 4 Length of lines/00Ft.		
Width of ditches ft. Depth of ditches ft inches Ax		
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 County of Harnett Date		