HARNETT COUNTY HEALTH DEPARTM

Nº19845

IN 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." Name: (owner) ROGER EDWARDS M New Installation Septic Tank SR#1443 LAFAYETTE RO Property Location: ☐ Repairs Mitrification Line __ Lot #_ 97 Subdivision VICTORIA HILLS _____ Ouadrant # ___ Tax ID #__ .98AC Lot Size: Number of Bedrooms Proposed: _ Basement with Plumbing: Garage: Water Supply: ☐ Well Public Public ☐ Community 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: Pump Tank: _____ gallons Septic Tank: 1000 gallons Subsurface exact length width of depth of of each ditch ft. ditches ft. ditches in. Drainage Field ditches French Drain Required: _____ Linear feet Date: This permit is subject to revocation if site Signed: _ plans or intended use change. Environmental Health Specialist 232 DRAWING MS THE MAINTAIN ALL SETBACKS REPAIR * CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION 26 270 D R ١ 98 E

HARI T COUNTY HEALTH DEPARTI IT AU ...ORIZATION TO CONSTRUCT

by Harnett County Health Department, Improvement Permit # 1985. 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.
ROSER EDWARDS 919-669-5353 Name Telephone#
1879 GOAT SLAND RD. SUMMERON SC 29148 Address
Property Location SR# Road Name
Road Name VICTORIA HILLS Subdivision Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines
Conventional [] Other
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback: 100 Ft.
Septic Tank 1000 gd Pump Chamber gd
NITIRFICATION FIELD SPECIFICATIONS
Number of fields / # of lines per field / Length of lines 400 Ft.
Width of ditches ft. Depth of ditches inches
French Drain: Linear feet required Depth of gravel
No works water and a 111
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.
W W RS 4/8/03
Signature of Authorized Agent for Harnett County of Harnett Date