HAR TT COUNTY HEALTH DEPARTN T

IMPROVEMENT PERMIT

Nº 19267 03-5-6566

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."	out of sewage without in st obtaining a written per	
Name: (owner) Jimmy (reacc	New Installation Septic Tank	
Property Location: SR#	Repairs Nitrification L	ine
A. 12		
Subdivision MACh Tree	Lot #42	
Tax ID#	Quadrant #	_
Number of Bedrooms Proposed: 3(50x76) Lo	ot Size: • 472 AC	
Basement with Plumbing: Garage:		
Water Supply: Well Public Community		
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal syst	tem on above captioned property. Subject to	
Type of system: Conventional Other		
Size of tank: Septic Tank: /oo gallons Pu		
Subsurface No. of ditches feach ditch 340 ft	ditches ft. ditches 8d in.	
French Drain Required: Linear feet	20 12 22	
Date:	33-11-35	
This permit is subject to revocation if site plans or intended use change. Signed:	Ja Ward of	
pains of intended use change.	/ Environmental Health Specialist	
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1	10 110	
STUB Out Plumbing shallow when		
) 100 Oct 100 milas the	Thous	
Maintain All set Backs		
Do not druc on park on septic.	Salta	
1)0 110, dry or or by		

HARN T COUNTY HEALTH DEPART IT AUTHORIZATION TO CONSTRUCT

by Harnett County Health Department, Improvement Permit # authorization shall be valid for a period not to exceed five (5) years This authorization will be invalid if ownership, site plans, or intended	11001 . This	
Jimy Prince / Mong Co		
	1 elephone#	
Address		
Property Location SR#		
	Road Name	
Subdivision Lot # # Bedrooms Proposed	Lot Size	
TYPE OF SYSTEM		
New Installation [] Repair Septic Tank Nitrificat	tion Lines	
[] Conventional [] Other		
[] Basement [] With Plumbing [] Without Plumbing		
Water Supply: [] Well Public Water Supply Minimum Well Setback:Ft.		
Septic Tank ODS gd Pump Chamber	Setback:Ft.	
NITIRFICATION FIELD SPECIFICATIONS		
Number of fields # of lines per field Length of lines 245 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 year		
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 Operation B.		
the conditions of the Improvement Permit and that a valid Operations	Permit has been issued.	
(In Whote)	2-17-22	
Signature of Authorized Agent for Harnett County of Harnett	Date	
<i>†</i>	Date	