03-5-6599

HARNETT COUNTY HEALTH DEPARTMI

Nº 19958

IM. ∴OVEMENT PERMI'I

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) Michael Anderson Homes INC New Installation Septic Tank SR# 1943 LAFAYEHE Zd Property Location: ☐ Repairs Mitrification Line Subdivision Victoria Halk II Ph 9 Lot #________ _____ Quadrant # _____ Tax ID #_ Lot Size: 160 x 274 Number of Bedrooms Proposed: _ Basement with Plumbing: Garage: Water Supply: ☐ Well Public ☐ Community Distance From Well: ____ Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other Purple Samolike ☐ Conventional Type of system: Septic Tank: 1000 gallons Size of tank: Pump Tank: 1000 gallons No. of ditches 4 exact length of each ditch 80 ft. ditches 3 ft. ditches 30 in. Subsurface Drainage Field French Drain Required: _ __ Linear feet Date: 3-25-03 This permit is subject to revocation if site plans or intended use change. *Contractor to MSI-T ON SITE Prion to STUB OUT OR INSTALLATION HOME

V.H. DRIVE SOUTH

HARN... COUNTY HEALTH DEPARTMENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit #			
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.			
	57.0		•
Michael Anderson Homes INC 919-552-1790 Name Telephone# 180 Woodland Ridge Drive F.V. N.C. 27526 Address			
Property Location SR#			LAFAY CHE
			From the Control of t
Vic foria Hell Subdivision	104 Lot#	# Padrooms Proposed	100×274
Succession			Lot Size
TYPE OF SYSTEM			
[] New Installation [] Repair	[Septic Tan	k [] Nitrifica	tion Lines
[] Conventional [] Other			
[] Basement [] With Plumbing [] Without Plumbing			
Water Supply: [] Well [] Public Water Supply Minimum Well Setback: 50' Ft.			
Septic Tank 1000 gd Pump Chamber 1000 gd			
NITIRFICATION FIELD SPECIFICATIONS			
Number of fields Z # of lines per field 4 Length of lines 50 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.			
James & Manhaufaces 3-25-03			
Signature of Authorized Agent for Harnett County of Harnett Date			3-25-03 Date