HAR T COUNTY HEALTH DEPARTM

HTE 03-5-7291 R

Phone De Bot

IMPROVEMENT PERMIT

20388

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) (U)75m Contracting New Installation Septic Tank Property Location: SR# | 20 \ Repairs \ Nitrification Line Hunter's Ridge Subdivision Tax ID #_____Quadrant #______Number of Bedrooms Proposed: 3(42 x 52) Lot Size: 42 A C Basement with Plumbing: Garage: X Water Supply: ☐ Community Distance From Well: 50 ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Septic Tank: gallons Pump Tank: gallons Size of tank: No. of ditches 2 exact length of each ditch 20 ft. Subsurface Drainage Field French Drain Required: Linear feet Signed: Grand Health Specialist Firethydeant This permit is subject to revocation if site plans or intended use change. / Meet onsite Before Installing STUB out Plumbing Shallow & (grand) DRIVE Maintain All set Back 30R 20

HARNETT COUNTY HEALTH DEPARTMENT AUT)RIZATION TO CONSTRU

by Harnett County Health Department, Improvement Permit # 2038 . This authorization shall be valid for a period not to exceed five (5) years from the date of issuance.	
authorization will be uivalla if ownership, site plans, or intended use change.	
Name Contracting	
	Telephone#
Address	
1301	*
Property Location SR#	Road Name
Subdivision SLASON V-7	3(42x52) YDAC
Lot #	# Bedrooms Proposed Lot Size
TYPE OF SYSTEM	
New Installation [] Repair Septic T	ank [Nitrification 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 gol	
NITIRFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field Length of lines Ft.	
Width of ditchesft. Depth of ditchesinches	
French Drain: Linear feet required Depth of gravel	
- Sparot Bravot	
No wastewater system shall be covered or placed into use by any person until an inspection by the	
Trained County Treath Department has determined that the system has been installed according	
the conditions of the Improvement Permit and that a valid Operations Permit has been issued.	
11-1207	
Signature of Authorized Agent for Harnett County of Harr	Date Date