HARI TOUNTY HEALTH DEPARTM

#63-5-8000 #63-5-7598 (SA) No 19349

IMIT ROVEMENT 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)	TOHNNY R	BAKER	New Installation	n Septic Tank
		Christian Late		
Subdivision Me	15 Mendon)	I	ot # 4Z
Tax ID #			Quadrant #	
Number of Bedroom	ns Proposed:	3	Quadrant # Lot Size:	18 545
Basement with Plur				
Water Supply:	Well P	ublic 🔲 Comm	unity	
Distance From Well	50'	ft.		
final approval.	4		esal system on above captions EEE-VV2 (sy Zarve	
Size of tank:	Septic Tank: _	1000 gallons	Pump Tank:	gallons
Subsurface Drainage Field	No. of ditches 4	exact length of each ditch	width of ft. ditches 3 ft.	depth of ditches 18-20 in.
French Drain Requi	red:	Linear feet		
This permit is subj plans or intended u	ise change.	Port Con Con	P -8	
	1	nels Meado	ກ)	•

HARNETT COUNTY HEALTH DEPARTMENT #03-5-7598 (FIX) AU' DRIZATION TO CONSTR T

Authorization is hereby given to construct a wastewater system to t	he specifications described				
by Harnett County Health Department, Improvement Permit #	19749 This				
authorization shall be valid for a period not to exceed five (5) years	from the date of iconome				
This authorization will be invalid if ownership, site plans, or intended	use change.				
Johnny R BAKER Name 5961 Christian Light IZD F.V. N.C. 275 Address					
Name	919-552-6550 Telephone#				
5911 Chaites - 17870 CV					
Address Address	24				
Property Location SR#	Christian Lold				
Property Location SR#	Road Name				
Property Location SR# Mels Medo 3 Subdivision Lot # Bedrooms Proposed TYPE OF SYSTEM	39.788 8105				
Subdivision Lot # # Bedrooms Proposed	Lot Size				
TVDE OF CHOPPING					
TYPE OF SYSTEM					
New Installation [] Repair [] Septic Tank [] Nitrifica	ation Lines				
[] Conventional [] Other EEE-ZZZ LAY					
[] Basement [] With Plumbing [] Without Plumbing					
Water Supply: [] Well [Public Water Supply Minimum Well Setback: 50 Ft.					
Septic Tank 1000 gal Pump Chamber gal					
NITIRFICATION FIELD SPECIFICATIONS					
Number of fields Z # of lines per field Y Length	of lines 60 Ft.				
Width of ditches ft. Depth of ditches inches					
·					
French Drain: Linear feet required Depth of gravel					
The state of the s					
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	ons Permit has been issued.				
Jana Sm / Lander	·				
Signature of Authorized Agent for Harnett County of Harnett	10-10-03				
Trainer of Framett	Date				

Date