ARN COUNTY HEALTH DEPARTMI

HTE 03-5-8128

IMPROVEMENT PERMIT

20430

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) William Comin Company New Installation Septic Tank Property Location: SR# Mongan Deve Repairs Nitrification Line Subdivision Brenda H.113

Tax ID #

Number of Bedrooms Proposed: 4(75x61)

Lot Size: 70 223 55 Ft Garage: Der Mas Signed Request Basement with Plumbing: Public Community Distance From Well: 50 ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Jother EEE-22 ZFLOW Blystynene Assresate Conventional Type of system: Septic Tank: 1000 gallons Pump Tank: gallons Size of tank: Subsurface width of ditches 3 ft. No. of exact length depth of ditches 1824 in. 3 exact length of each ditch 75 ft. Drainage Field ditches French Drain Required: _____ Linear feet Date: 04-12-04 Signed: ____ This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist 204 do 112 26 50 Barns AVL Do not drive or park on sprice system MAINTAIN All Set BAch STUD Out Plumbing At ground Level Cshallow

HARNETT CONTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 20430. 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.
William Curch Company
Telephone #
Address
MORYAN DEVIS Property Location SR# Road Name
Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair [Septic Tank [Nitrification Lines
New Installation [] Repair [Septic Tank [Nitrification Lines [] Conventional [Other EEC-222 Flow Polystyrene Aggregate
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback: 50 Ft. Septic Tank Qal Pump Chamber
Septic Tank gal Pump Chamber gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields# of lines per field Length of lines Ft.
Width of ditches $\underline{3}$ ft. Depth of ditches $\underline{18.34}$ 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.
Jor West RS 04-12-04
Signature of Authorized Agent for Harnett County Date