## T COUNTY HEALTH DEPARTM

## **IMPROVEMENT PERMIT**

21064

HTE 03-5-8157

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) Kent Pierce	New Installation Septic Tank
Property Location: SR#	Repairs Nitrification Line
Subdivision PeachTRTC	Lot #
Tax ID #	Quadrant #
Number of Bedrooms Proposed: 3 (36 x 50)	Lot Size: 86AC
Basement with Plumbing: Garage: Water Supply: Well Public Communit Distance From Well: ft.	X NOTE Change In house
Water Supply:	y / 2001-20
Distance From Well:ft.	ROCHTION
Following is the minimum specifications for sewage disp to final approval.	
Type of system:	my to Chambre system
Size of tank: Septic Tank: gallons	A CONTRACTOR OF THE CONTRACTOR
Subsurface No. of exact length of each ditch 300	
French Drain Required:Linear feet	Date: 01-21-04 Signed: 92 WARS
This permit is subject to revocation if site	Signed: 42 WARS
plans or intended use change.	Environmental Health Specialist
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house becation 23	Before Installing
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PP 60' Repair	75'
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## HARI T COUNTY HEALTH DEPAR ENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 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.  Name	
Telephone#	
Address	
Property Execution SR#  CACh True 116  Road Name	
Subdivision Lot # # Bedrooms Proposed Lot Size	
TYPE OF SYSTEM	
New Installation [] Repair   Septic Tank   Nitrification Lines	
[] Conventional [Jother Tupy to Charles	
[ ] Basement [ ] With Plumbing [ ] Without Plumbing	
Water Supply: [ ] Well Public Water Supply Minimum Well Setback: 5 Ft.	
Septic Tank OS god Pump Chamber OS god	
NITIRFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field Length of lines 20	
Width of ditches ft. Depth of ditches inches Ft.	
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 her	
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.	
Signature of Authorized Agent for Hamatt Courts Si	
Signature of Authorized Agent for Harnett County of Harnett  Date	