HARN [COUNTY HEALTH DEPARTM]

HTE 03-5-8489

IMPROVEMENT PERMIT

21056

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." AVINESS New Installation Septic Tank Name: (owner) Property Location: SR# ///7 Nitrification Line ____ Lot # __**5**____ Subdivision WOOd Shire Tax ID # Ouadrant # Number of Bedrooms Proposed: 3(26x58) Lot Size: - 46 AC Basement with Plumbing: Garage: X 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. Conventional Other____ Type of system: Pump Tank:____gallons Size of tank: Septic Tank: 1000 gallons exact length Subsurface No. of of each ditch 200 ft. Drainage Field ditches French Drain Required:_____ Linear feet This permit is subject to revocation if site plans, or intended use change. 196 STUB Out Plumbing shallow where Shown Maintain All Set Bach

HARN COUNTY HEALTH DEPART INT 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.
CAVINGII Land Dev.
Telephone#
Address
Property Location SR#
Subdivision Lot # # Pole P
Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[New Installation [] Repair Septic Tank [Nitrification Lines
Conventional [] Other
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback:Ft.
Septic Tank OOO gd Pump Chamber gd
NITIRFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines 200 Ft.
Width of ditches ft. Depth of ditches inches
French Drain: Linear feet required Depth of gravel
No wastewater system shall be covered or place 1.
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 in 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.
. Operations Permit has been issued.
1 to west a
Signature of Authorized Agent for Harnett County of Harnett

Date