HARN COUNTY HEALTH DEPARTM

HTE 04-5-88452 IMPRO

IMPROVEMENT PERMIT

21144

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) Gregory Inc.

Property Location: SR# 1542 Old Bues Creek & Repairs

New Installation Repairs

New Installation Repairs Subdivision Jandy Grove Lot # 23 _____ Quadrant # _____ Tax ID # Number of Bedrooms Proposed: J Lot Size: 594c Garage: Basement with Plumbing: Public □ Well ☐ Community Water Supply: Distance From Well: 50 in ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. **Z** Conventional ☐ Other Type of system: Pump Tank:____ gallons Septic Tank: 1000 gallons Size of tank: width of depth of Subsurface No. of exact length of each ditch 75 ft. ditches 18-24 in. ditches I ft. ditches Drainage Field French Drain Required: Linear feet This permit is subject to revocation if site Signed: _ plans or intended use change. Environmental Health Specialist * Martin all retbacks * Ditches to start at 18 inches advate 24; nches 233 Ho. 52 155 IR I 161

Road

HARNETT CC TY DEPARTMENT OF PUBL 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 # 21144 . 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 Can Harman
Name Telephone #
Address N. Releigh St. Angier, N. C. 27501
Property Location SR# Glad Soies Creek Road Name
Subdivision Lot # Bedrooms Proposed Lot Size
Subdivision 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 Tankgal Pump Chambergal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields/ # of lines per field 4_ Length of lines75 Ft.
Width of ditches ft. Depth of ditches 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.
My Mori R.S. Signature of Authorized Agent for Harnett County Date