HAR **IT COUNTY HEALTH DEPARTM**

HTE 04-5-8881 20698 IMPROVEMENT 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) CAVINESS LANE New Installation Septic Tank Property Location: SR#_ //41 ☐ Repairs Nitrification Line 6 Forest Lot # /03 Subdivision High Land Tax ID # Ouadrant # Number of Bedrooms Proposed: 3(50 x 60) Lot Size: 37 Ac Basement with Plumbing: Garage: Water Supply: ☐ Well 2 Public Community Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other 25% Reduction SYSTEM Conventional Type of system: Septic Tank: 1000 gallons Pump Tank: gallons Size of tank: Subsurface No. of exact length width of depth of ditches 18-2 1 in. exact length of each ditch 75 ft. width of ditches 3 ft. ditches Drainage Field French Drain Required: ____Linear feet 25% Reduction This permit is subject to revocation if site Signed: Environmental Health Specialist plans or intended use change. Keep drain Lines 25 from REAR PODERTY Line Or 15' from Top of DRD. Wase Ditch - Which ever Is greatest. Meet onlite MAINTAIN All 173 SetBACKI 13 14

If wing Chamber SYSTEM must Place Washeds The Along sides To Prevent clossing

HARNETT C NTY DEPARTMENT OF PUI C 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 # 2067 * 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.
CAviness Land
Name Telephone #
Address
1141
Property Location SR# Road Name
High Land Forest 103 3(50x60) 37Ac Subdivision Lot# #Bedrooms Proposed Lot Size
Subdivision Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair [Septic Tank [Nitrification Lines
New Installation [] Repair [Septic Tank [Nitrification Lines [] Conventional Sother 25% Reduction by to
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback:Ft.
Septic Tank gal Pump Chamber gal
NITRIFICATION FIELD SPECIFICATIONS
of lines per field Length of lines Ft.
Number of fields # of lines per field 2 Length of lines 75 Ft. Width of ditches ft. Depth of ditches 1804 inches 575 Federal SYSTEM
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.
de in inprovement i erint and that a valid Operations Permit has been issued.
Jo W 25725 3-19.04
Signature of Authorized Agent for Harnett County

Date