HARNE'

COUNTY HEALTH DEPARTMEN

HTE 04-5-8969

IMPROVEMENT PERMIT

20779

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) Confort Hones TNC New Installation Septic Tank Property Location: SR#1417 Chaisham Zight Repairs Nitrification Line Subdivision Forest Transs Garage: Basement with Plumbing: Public Water Supply: ☐ Well Community Distance From Well: 50° ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other Conventional Type of system: Pump Tank: 1000 gallons Septic Tank: 1000 gallons Size of tank: Subsurface No. of exact length width of ditches 3 ft. No. of ditches 4 exact length of each ditch 80 ft. depth of Drainage Field ditches 18-22 in. French Drain Required: Linear feet Date: 3-31-04 Signed Commental Health Specialist This permit is subject to revocation if site plans or intended use change. 410'0FC 60 Tump Specifications 526PM@ 22' C 12' 12 6 HOME ロルエント KINGS DROOK CINCLE

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 #	
Comfort Homes INC	7/9-553-3242 Telephone #
Name P.O. Box 369 Clayh N.C. Address	27520
Property Location SR#	Christian Life
Subdivision Lot # Bedrooms Pr	. 461
TYPE OF SYS	
[New Installation [] Repair [Septic Tank	
[+ Conventional [+ Other Pup to Convention	
[] Basement [] With Plumbing [] Without Plumbing	
Water Supply: [] Well [] Public Water Supply Minimum Well Setback:Ft.	
Septic Tank gal Pump Chamber gal	
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields# of lines per field# Length of linesFt.	
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 b y 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.	
Signature of Authorized Agent for Harnett County	3-31-44 Date