## HARI T COUNTY HEALTH DEPARTM

20788

## HTE 04-5-9226

## **IMPROVEMENT PERMIT**

Name: (owner) Michael DAVIS  Property Location: SR#/4/17 Christian Slight  Subdivision	Lot #	
Subdivision	Lot #	
Tax ID #	Lot # Quadrant # : <i>58 acce</i>	
Tax ID #	Quadrant # : <i>58 acce</i>	
Number of Bedrooms Proposed: Lot Size Basement with Plumbing: Garage:	:,58 Acre	
Basement with Plumbing: Garage:		
Water Supply:		
Distance From Well: 50'-100' ft.		
Following is the minimum specifications for sewage disposal systeto final approval.		
Type of system:	luction System	
Size of tank: Septic Tank: 1000 gallons Pump Ta		
	width of ditches 3 ft.	depth of ditches 20 -22 <sub>m</sub> .
French Drain Required:Linear feet		
Date:	4-22-04	
This permit is subject to revocation if site Signed:	Environmental He	Tanhant @ Res.
plans or intended use change.	Environmental He	ealth Specialist
Pant INNOVATIVE A IZEPAIL, 30  50 HOME  Con Repair  Repair  E		
SR 1412 CHRISTE	AN LIGHT R	ZD

## HARNETT CO TY DEPARTMENT OF PUE CHEALTH 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 # 20788 . 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.		
Michael DAVIS 919-552-6958		
Name Telephone #		
Michael DAVIS Name  919-552-6958 Telephone #  180 Walter Allen LN Fugury N.C. 27576  Address		
Property Location SR#  Charles Francisco Location SR#		
Road Name  3 .58		
Subdivision Lot # # Bedrooms Proposed Lot Size		
TYPE OF SYSTEM		
[ New Installation [ ] Repair [ Septic Tank [ ] Nitrification Lines		
[ ] Conventional [ Tother 75% Reduction System		
[ ] Basement [ ] With Plumbing [ ] Without Plumbing		
Water Supply: [ ] Well [ Public Water Supply Minimum Well Setback: 50' 104 t.		
Septic Tank gal Pump Chamber gal		
NITRIFICATION FIELD SPECIFICATIONS		
Number of fields # of lines per field Length of lines 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.		
d 2000 1 1 1 2 2 3		
Signature of Authorized Agent for Harnett County  Date		
Signature of Authorized Agent for Harnett County  Date		