HARN T COUNTY HEALTH DEPARTMI

HTE04-5-9441

IMPROVEMENT PERMIT

20816

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) WILSON BUILT HOMES New Installation Deptic Tank Property Location: SR# 1437 Ballaco Ro Repairs Nitrification Line BALLARO WOODS Lot#_ Subdivision Tax ID #_ ____ Quadrant # __ 3 Lot Size: . 549C Number of Bedrooms Proposed: Basement with Plumbing: Garage: N Public Community Distance From Well: 100 ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: **X** Conventional ☐ Other____ Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons Subsurface No. of exact length width of depth of ditches H of each ditch 75 ft. Drainage Field ditches 3 ft. ditches 30 in.

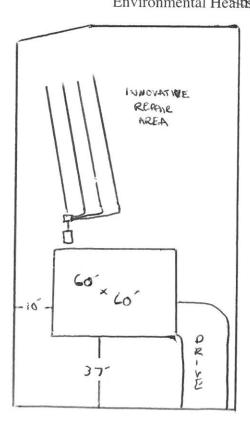
This permit is subject to revocation if site plans or intended use change.

*MAINTAIN ALL SETBACKS

* CALL WITH ANY QUESTIONS
PRIOR TO INSTALLATION

French Drain Required: Linear feet

Date: 5 24 04
Signed: Environmental Health Specialist



HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUT ORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit #_ 20816 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.
streptions, or intended use change
Name Name G19-422-3318
Telephone #
PO BOX 6127 RALEIGH NC 27629
Property Location SR# BALLARO RO
Road Name
BALLARO WOODS 6 3
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: 100 Ft.
Septic Tank 1000 gal Pump Chamber gal
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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.
Signature of Authorized Agent for Harnett County 5 24 04 Date