P RNETT COUNTY HEALTH DEPAPMENT ENVIRONMENTAL HEALTH SEC. ON

Nº13672

OPERATIONS PERMIT

Name: (owner) Z	Scian Weller	n s	New Installation	Septic Tank
Property Location:	SR#/407 Cash	Siepheren	☐ Repairs	☑ Nitrification Line
	Subdivision		Lot #	-
TAX ID#			Quadrant #	
Contractor: Very Sieple			Registration #	
Basement with Plun	nbing:	Garage:		
Water Supply:	Well Public	C Community		
Distance From Well	:50'	ft.		
Following are the s	pecifications for th	ne sewage disposal sys	tem on above captione	d property.
	/			
Type of system:	Conventional	Other		
Size of tank:	Septic Tank: 100	gallons Pur	mp Tank: gall	ons
Subsurface	No. of	exact length	width of de ditches ft. dit	pth of
			ditches ft. dit	ches & CO in.
French Drain:	Linear	feet		
		Date:	4-30.02	
PERMIT NO/8	495	Inspected I	W. Oan CMak	1 Davos
		Inspected	oy: <u>Cana C Mad</u> Environmental He	ealth Specialist
		ol-	PD 7/35"	///
		,	VI)	///
DREVE		1500 (300	1 11000 0 1 17	
Digit			Home	
	1.00	0		
1	18 2	Picor		
	100	Poper Paper		\
		•		
			//).	
	Drens			
	-			

#01-5-2871

HARNETT COUNTY HEALTH DEPARTMENT

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) Bruan WIlliams New Installation Septic Tank Property Location: SR# 1407 WAde STEPHENSON) ☐ Repairs Nitrification Line Subdivision _____ __ Lot # Quadrant # ___ Tax ID #_ Basement with Plumbing: Garage: Water Supply: ☐ Well Public Public - Community Distance From Well: ____ Following is the minimum specifications for sewage disposal system on above captioned property. Subject to Conventional Type of system: Other ____ Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons Subsurface exact length width of depth of of each ditch 75 ft. ditches 3 ft. ditches 18-20 in. ditches_5 Drainage Field _____ Linear feet French Drain Required: ____ Date: ___ 9-7-01 This permit is subject to revocation if site plans or intended use change. DEnvironmental Health Specialist * Contractor to MEST Mantan all setterches INSETTE Prior to Gro' to read DRIDUE