HAPNETT COUNTY HEALTH DEPARTMENT

Nº 17117

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." New Installation Septic Tank Name: (owner) KIRAN FRANTON Repairs Property Location: Nitrification Line Subdivision __ ININI tu Quadrant #___ Tax ID #_____ Number of Bedrooms Proposed: Lot Size: Basement with Plumbing: Garage: Water Supply: Public Well ☐ Community Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional Conventional Other_ Type of system: Septic Tank: 1000 gallons Size of tank: Pump Tank: _____ gallons Subsurface No. of exact length width of depth of ditches _____ of each ditch _____ ft. ditches ____ Drainage Field ft. ditches 18-22 in. French Drain Required: _____ Linear feet This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist 51 1538 MARRY

AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # _________, 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.

Owner or Authorized Agent
Name: Kiran Framp ton Telephone # 919-557-644
Address: 7030 Mahny Road
Property Location: SR #/5 3 8 Road Name
New Installation Repair Septic Tank Nitrification Lines
Subdivision Tainity MI+1? Lot # 4
Number of Bedrooms Proposed:
Basement With Plumbing Without Plumbing
Water Supply: Well Public Minimum Well Setback: _50 ft.
Type of System: Conventional Other
Tank Volume: Septic Tank 1000 gallons Pump Chamber gallons
Nitrification Field Specifications
Number of fields/ Number of Lines per Field/ Length of lines/ 5-0
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.
Authorized Agent for Harnett County Health Department
Name: games & Mulposes. Date: 4-75-00
Revised 2/96) CNSTRCT WPD