Dear Run Ct.

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) Serry Gregory Property Location: SR# 210	New Installation
Subdivision Dec Run	Lot# 16R
Tax ID#	
Number of Bedrooms Proposed: Lot Size:	.83ac
Basement with Plumbing: Garage:	
Water Supply: □ Well □ Public □ Community	
Distance From Well: ft.	
Following is the minimum specifications for sewage disproperty. Subject to final approval. Type of system: Conventional Other	
Size of tank: Septic Tank: 1000 gallons Pump Ta	ank: gallons
Subsurface No. of exact length of each ditch ft.	width of depth of ditches ft. ditches in.
French Drain required: Linear feet	
This permit is subject to revocation if site plans or intended use change. Date: Signed	ed: 7-31-96 Boya R.S.
VOID AFTER 5 YEARS	Environmental Health Specialist
Joseph July Lough July July July July July July July July	Maintain Setbacks Start lines at 30" Lines behind house 18"-24"

HA ETT COUNTY HEALTH DEPAILENT AUTHORIZATION TO CONSTRUCT

Owner or Authorized Agent Lecry Gregory	
Name: Telephone # 772-1945	
Address: 8312 Fayetheville Rd. Raleigh NC	
Property Location: SR # 2/0 Road Name	
New Installation	
Subdivision Lot # 16R	
Number of Bedrooms Proposed: 3 Lot size: - 73 cc	
Basement With Plumbing Without Plumbing	
Water Supply: Well Public Minimum Well Setback: ft.	
Type of System: Conventional Other	
Tank Volume: Septic Tank 1800 gallons Pump Chamber gallons	
Nitrification Field Specifications	
Number of fields Number of Lines per Field Length of lines	
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:	
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