HAI IT COUNTY HEALTH DEPART! IT
HTE ATTEMPT TO REPAIR IMPROVEMENT PERMIT

20278

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin constitution 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) MT Pisgah Pres. Charle Parina's Thew Installation of Septic Tank
Name: (owner) MT Risgah Res. Charl Parshage New Installation Septic Tank Property Location: SR# Repairs Nitrification Li
Subdivision Lot #
Tax ID #Quadrant #
Tax ID # Quadrant # Number of Bedrooms Proposed:
Basement with Plumbing: Garage:
Water Supply:
Distance From Well: 50 ft.
Following is the minimum specifications for sewage disposal system on above captioned property. Subjeto final approval.
Type of system: Conventional Conventional
4.24
Size of tank: Septic Tank:gallons
French Drain Required:Linear feet Date:
This permit is subject to revocation if site Signed:
plans or intended use change. Environmental Health Specialist
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HARNETT COUNTY HEALTH DEPARTMENT AI HORIZATION TO CONSTI

by Harnett County Health Department, Improvement Permit # 2278 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.
M7 Pissah Pro Ch. Parsnay
Name Telephone#
Address
2128 MGARTHER
Property Location SR# Road Name
Subdivision Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[] New Installation [] Repair [] Septic Tank [] Nitrification Lines
[] New Installation [] Repair [] Septic Tank [] Nitrification Lines [] Conventional [] Other [] Other [] Nitrification Lines
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback:Ft.
Septic Tank
NITIRFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines
Width of ditchesft. Depth of ditchesinches
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
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.
9-11-22
Signature of Authorized Agent for Harnett County of Harnett Date