## **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) Cumberland h			
Subdivision STOCKTON		Lot #	3
Tax ID#		Quadrant #	
Number of Bedrooms Proposed: —	Lot	Size: 1400 59	FT
Basement with Plumbing:   Ga	rage:		
Water Supply:  Well Pub	olic 🖸 Commun	ity	
Distance From Well:	ft.		
Following is the minimum specific property. Subject to final approve		disposal system on abo	ove captioned
Type of system:  Conventional	Other		-
Size of tank: Septic Tank:	gallons Pun	np Tank: gallor	ns
		width of ft. ditches ft.	depth of ditches 18-24 in
French Drain required:		Date:6- Z	
plans or intended use change.		*maita	Health Specialist
Z <sup>K</sup>	Home Lapara 60	HOOH S	

## H. JETT COUNTY HEALTH DEPA JENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 10479. 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 Cumbulard Roms			
Name: Cunbuland Hones Telephone # 852-4345			
Address: 70 BOX 1524 PUNN N.C. 28334			
Property Location: SR # HWY ZIO Road Name 210			
New Installation Repair Septic Tank Nitrification Lines			
Subdivision STOCKTON Lot # 3			
Number of Bedrooms Proposed: 3 Lot size: 14000 Sept.			
Basement With Plumbing Without Plumbing			
Water Supply: Well Public Minimum Well Setback: 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			
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: James & Market Date: 6-25-9( (Revised 2/96)cnstrct.wpd			