

HARNETT COUNTY HEALTH DEPARTMENT

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Septic Tank Inspection Certificate

No 4822

Owner Weldon R.S. Address Spring #1
(MUST BE FILLED IN) (MAILING ADDRESS)

Contractor Center Address Spring #1
(MAILING ADDRESS)

Location of Premises OK B 141
(SUBDIVISION, STREET OR ROAD NAME OR NUMBER, LOT NO.)

Details of Septic Tank System

Kind of Material for Tank: Concrete Other _____

Size of Tank: Length _____ Ft. Width _____ Ft. Depth _____ Ft. Capacity 1000 Gallons

Subsurface Drainage Field No. of Ditches 1 Exact Length of each Ditch 100 Ft. Width of Ditches 6 Depth of Ft. Ditches _____ Inches

Square Feet in Absorption Field 6000 Surface Drainage Required _____ Linear Ft.

Approved by DAW on 12-5-14
(SANITARIAN)

Permit No. _____ Date _____