

HARNETT COUNTY HEALTH DEPARTMENT

Septic Tank Inspection Certificate

No 4602

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

Contractor Carter Address Jay
(MAILING ADDRESS)

Location of Premises OK # 204
(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 900 Gallons

Subsurface Drainage Field No. of Ditches 1 Exact Length of each Ditch 100 Ft. Ditches 6 Width of Ditches _____ Ft. Ditches 24 Depth of Ditches _____ Ft. Ditches _____ Inches

Square Feet in Absorption Field 600 Surface Drainage Required _____ Linear Ft.

Approved by [Signature]
(SANITARIAN)

Permit No. _____ Date 7-19-74