HARNETT COUNTY HEALTH DEPARTMENT

IN ROVEMENT PERM

Nº 12446

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) Jeff Suize New Installation Septic Tank
Property Location: SR# 42 Repairs Nitrification Line
Subdivision East mill Lot #_/
Tax ID # Quadrant #
Number of Bedrooms Proposed: 3 Lot Size: 4.707ac
Basement with Plumbing: Garage:
Water Supply: Well Public Community
Distance From Well:ft.
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.
Type of system: Conventional Other
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of Drainage Field ditches 4 of each ditch 100 ft. ditches 3 ft. ditches 1 in.
French Drain Required: Linear feet
This permit is subject to revocation if site Date: 12-3-97 Signed: Figure Q. Baye R.5.
This permit is subject to revocation if site Signed: Signed: Environmental Health Specialist
plans or intended use change. Environmental Health Specialist
Maintain Setbacks
(port) will be issued when system
area is cleaned + thatth Dept
final layout may change
Contractor to meet on site
print to installing
70
LOT repair
The state of the s

HARNETT COUNTY HEALTH DEPARTMENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 12444 . 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
Name: Telephone # _ 992-5244
Address: _ R+ 7 Box 435 DUAN NC 28334
Property Location: SR # Road Name
New Installation Repair Septic Tank Nitrification Lines
Subdivision Lot #
Number of Bedrooms Proposed:3 Lot size:
Basement With Plumbing Without Plumbing
Water Supply: Well Public Minimum Well Setback: ft.
Type of System: Conventional Other
Tank Volume: Septic Tank 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: Momas O. Boya R.S. Date: 4-13-99
(Revised 2/96)cnstrct.wpd