Nº 10691

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 Property Loca	er) to large old G	New	v Installation airs	Septic Tank Nitrification	Line	
Subdivision	Heritage V.11	Age	*	Lot #	F.58	
Tax ID#		0	Quadr	ant #		
Number of Be	drooms Proposed:	3	Lot Size: 2	1,705 Se	ift.	
Basement with	h Plumbing: 🔘 Gar	age: 🗆				
Water Supply:	□ Well □ Pub	lic 🗆 Com	munity			
Distance From	Well:	ft.				
property. Su	the minimum specific bject to final approve	ıl.				
	n: Conventional					
	Septic Tank: 1000					1
Subsurface Drainage Field	No. of ditches 4	exact length of each ditch	widtl ft. ditch	h of the ses ft.	depth of 18-24	in.
French Drain	required:	Linear feet		2 00 01		
This permit is subject to revocation if site plans or intended use change. Date: 9.30-96 Signed: 9.30-96						
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AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 10691. 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 Kil Aerold Cono Name: _____ Telephone # Property Location: SR# HW 24 Road Name ____ New Installation _____ Repair ____ Septic Tank ____ Nitrification Lines ____ Subdivision Heritage Village Lot# F-58 Number of Bedrooms Proposed: 3 Lot Size: 21, 705 55 ft Basement ____ With Plumbing ____ Without Plumbing Water Supply: Well ____ Public X Minimum Well Setback: Some 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 _____ & o____ Width of Ditches 3 ft. Depth of ditches 18'24 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 of Harnett County Health Department Name: 430 155 Date: 9.30-55