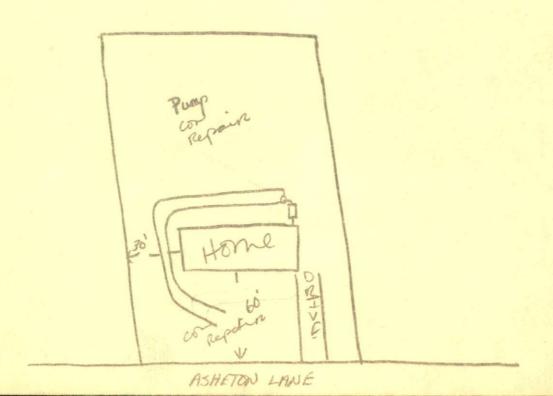
Nº 10186

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) Michael Howeye Property Location: SR# 1511		New Installation Repairs	Septic Tank Nitrification Line
Subdivision Pinecroft II Tax ID# Number of Bedrooms Proposed: 3			
Basement with Plumbing: Garage Water Supply: Well Public Distance From Well: ft. Following is the minimum specificati property. Subject to final approval.	□ Community	osal system on abo	ve captioned
Type of system: Conventional Size of tank: Septic Tank: Decomposition Subsurface No. of example of the conventional gall subsurface and the conventional gall subsurface of the conventional gall subsurface and the conventional gall subsurface are conventional gall subsurface and the conventional gall subsurface are conventional gall subsurface and the conventional gall subsurface are conventi	llons Pump Tai	nk: gallons	
Drainage Field ditches of of French Drain required: Lin This permit is subject to revocation in plans or intended use change.	near feet f site Date:	ditches ft.	96
VOID AFTER 5 YEARS		Environmental H	



Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # /0/86. 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.

will be invalid it ownership, site plans, or intended use change.			
Owner or Authorized Agent Michael Harvey Cuff			
Name: Michael Honoycoff Telephone # 659-2139			
Address: Bit Pricioft Road Angien, N.C.			
Property Location: SR # Hwy 210 Road Name Hwy 210			
New Installation Repair Septic Tank Nitrification Lines			
Subdivision Reconft Lot # 19			
Number of Bedrooms Proposed:			
Basement With Plumbing Without Plumbing			
Water Supply: Well Public Minimum Well Setback: _ \(\frac{5}{5} \) ft.			
Type of System: Conventional Other			
Tank Volume: Septic Tank 1880 gallons Pump Chamber gallons			
Nitrification Field Specifications			
Number of fields Number of Lines per Field Length of lines / 25			
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 for Harnett County Health Department			
Name:			