Nº08700

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".

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Name: (owner) LATTY E1			
Property Location: SR# 110	NAY KA	□ Repairs	Nitrification Line
Subdivision		Lot #	
Tax ID#		Quadrant #	
Tax ID#	夏 4	Lot Size: 2.03 ACRCS	
Basement with Plumbing:	Garage: 🗖		1
Water Supply: Well	Public Co	mmunity	
Distance From Well: 50 ~	ft.		
Following is the minimum s property. Subject to final a		wage disposal system on abo	ove captioned
Type of system: 🔟 Convention	al Other		
Size of tank: Septic Tank:	gallons	Pump Tank: gallon	S
Subsurface No. of Drainage Field ditches	exact length of each ditch	width of ft. ditches ft.	depth of ditches 18-24 in.
French Drain required:	Linear feet	V"	
This permit is subject to rev		Date: 12-5-95	
plans or intended use change	ge.	Signed: Jor W.	- RS
		Environmental 1	Health Specialist
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HARNETT COUNTY HEALTH DEPARTMENT

AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnet County Health Department Improvement Permit # 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, sit
plans, or intended use change.
Owner or Authorized Agent Larry Elliott
Name: Elliott Telephone # 893 - 9153
Address: 5105 RAY RJ Spring Lake ne
Property Location: SR# 1121 Road Name RA
New Installation Repair Septic Tank Nitrification Lines
Subdivision Lot #
Number of Bedrooms Proposed: Lot Size: 2-03 a c
Basement With Plumbing Without Plumbing
Water Supply: Well Public
Minimum Well Setback: 50 n. ft.
Type of System: Conventional Y Other
Tank Volume: Septic Tank 1200 gallons, Pump Chamber gallons
Nitrification Field Specifications
Number of fields Number of Lines Per Field Length of Linesloo
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 Count Health Department has determined that the system has been installed according to the conditions of the mprovement permit and that a valid operations permit has been issued.
Authorized Agent of Harnett County Health Department
Name: Goz WA R) Date: 12-5-95 See Condition of permit.
see conditions of permit.