HTE#	
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## **IMPROVEMENT PERMIT** 22376

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) Sylvia Frederick New Installation Septic Tank Repair Property Location: SR# 1705 110 Fassepowd Nitrification Line Expansion 

Expansion Lot # Tax ID# Quadrant # Number of Bedrooms Proposed: 3Bun 30600 Lot Size: /. 26 Basement with Plumbing: Garage: Water Supply: Well Public Community Distance From Well: 570 - 100 Type of system: Conventional Other 25% Reduction System Size of tank: Septic Tank: gallons Pump Tank: gallons Subsurface No. of exact length width of depth of Drainage Field ditches 1 ft. of each ditch 240 ft. ditches 3 ft. ditches 24 in. French Drain Required: - Linear feet Date: This permit is subject to revocation if site plans or intended use change. YEARS FROM ABOVE DATE Signed: Poneu Ex Home

## HARNETT COUNTY DEPARTMENT OF BLIC HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit #	
Sylved Maderick 910-230-1067  Telephone #  46 Endmane CN DUNN N.C. 28334  Address	
Property Location SR#  O115 FATTRSCOND  Road Name	
- 360 19/	
Subdivision Lot # Bedrooms Proposed Lot Size	
TYPE OF SYSTEM	
[ ] New Installation (   Repair ) [   Septic Tank   [   Nitrification Lines	
[ ] Conventional [ Tother 25% Reduction Syst	
[ ] Basement [ ] With Plumbing [ ] Without Plumbing	
Water Supply: [ ] Well [ ] Public Water Supply Minimum Well Setback: 100-52Ft.	
Septic Tankgal Pump Chambergal	
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field / Length of lines ZY & Ft.	
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.	
Sanature of Authorized Agent for Harnett County  Date	