

IMPROVEMENT PERMITS

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."

Then onto Walter Waddell so to Wild Plum - Wild Plum

Distance From Well: 50m ft.

French Drain Required: _____ Linear feet

Signed: Q. W. Smith

This permit is subject to revocation if site plans or intended use change.

Environmental Health Specialist

STUB OUT Plumbing
Shallow 18-30' depth
Depth

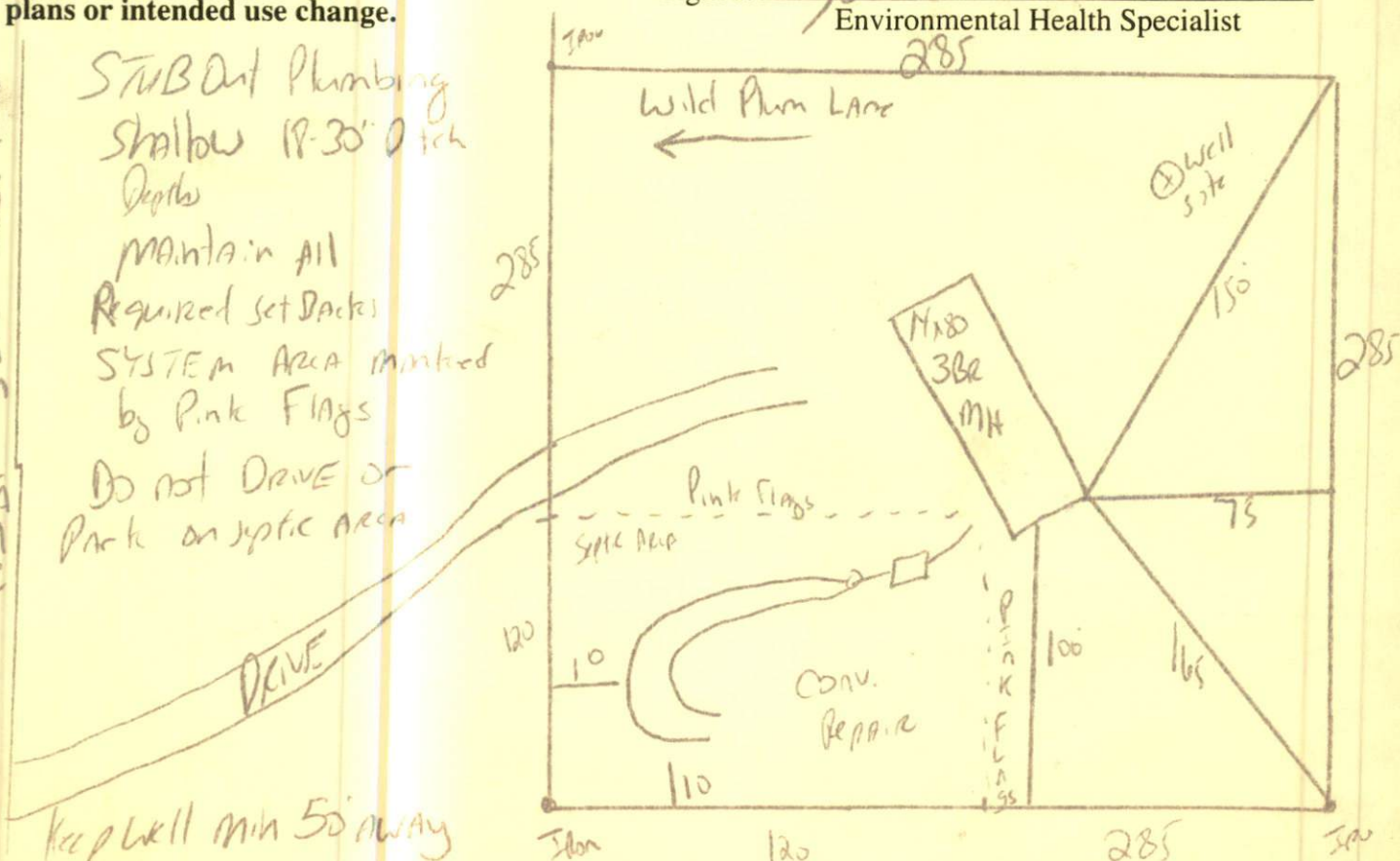
maintain all

Required Set Backs

SYSTEM Area marked
by Pink Flags

Do not DRIVE or
Park on Jytic Area

Keep well min 50' away
from split Area



HAR T COUNTY HEALTH DEPART IT
AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 14430. 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 Kelly of Andrae Kelly

Name: _____ Telephone # 774-9605

Address: _____

Property Location: SR # 1001 Road Name _____

New Installation ☒ Repair _____ Septic Tank ☒ Nitrification Lines ☒

Subdivision _____ Lot # _____

Number of Bedrooms Proposed: 3 Lot size: 1.80 Ac

Basement _____ With Plumbing _____ Without Plumbing _____

Water Supply: Well ☒ Public _____ Minimum Well Setback: 50 ft.

Type of System: Conventional ☒ Other _____

Tank Volume: Septic Tank 1000 gallons Pump Chamber _____ gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 2 Length of lines 100

Width of ditches 3 ft. Depth of ditches 18-30 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: Ch W. Ari Date: 10-23-98