## HARNETT COUNTY HEALTH DEPARTMENT

Nº 13985

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) Abre & Wood John son New Installation Septic Tank Nitrification Line Property Location: SR#\_/705 Subdivision \_\_\_\_\_ Lot #\_\_\_\_ Tax ID #\_\_\_\_\_\_ Ouadrant #\_\_\_\_\_ Number of Bedrooms Proposed: 3 Lot Size: 200' x 200' Basement with Plumbing: Garage: Public Water Supply: □ Well ☐ Community Distance From Well: \_\_\_\_\_50' ft Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional Type of system: Other Size of tank: Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons Subsurface No. of exact length width of depth of ditches ft. ditches ft. ditches ft. ditches Drainage Field French Drain Required: \_\_\_\_\_ Linear feet This permit is subject to revocation if site plans or intended use change. 200 HOME R IV

## HARNETT COUNTY HEALTH DEPARTMENT AU'. ORIZATION TO CO TRUCT

Owner or Authorized Agent Maryort Lala Bryont
Name: Alece Wood Johnson Telephone # 892-0479
Address: RT 6 BOX 12 DUNN N.C. 28334
Property Location: SR # 1705 Road Name OID Fairground
New Installation Repair Septic Tank Nitrification Lines
Subdivision Lot #
Number of Bedrooms Proposed: 3 Lot size: 200 x 200'
Basement With Plumbing Without Plumbing
Water Supply: Well Public Minimum Well Setback: _50' ft.
Type of System: Conventional Other
Tank Volume: Septic Tank 1900 gallons Pump Chamber gallons
Nitrification Field Specifications
Number of fields _ Z _ Number of Lines per Field _ Z _ Length of lines _ 150
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.
Authorized Agent for Harnett County Health Department
Name: games & Marchart PRS. Date: 2-19-98
(Revised 2/96)cnstrct.wpd