40000007 Landuse #

HARNETT COUNTY HEALTH DEPARTMENT

13760

IMPRC EMENT PERMIT

tion of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written per from the Harnett County Health Department."	mit
Name: (owner) Curin Builders Inc. PNew Installation PSeptic Tank	
Property Location: SR# 1440 Janus Porcis Rd. Repairs Printing Repairs	ine
Subdivision Kinnis Creek Sect. 2 Lot # 24	
Tax ID # Quadrant #	
Tax ID # Quadrant # Number of Bedrooms Proposed: 3 Lot Size: 1. 49 Ac	
Basement with Plumbing: Garage:	
Water Supply: Well Public Community	
Distance From Well: ft.	
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Other	K
Size of tank: Septic Tank: gallons Pump Tank: gallons	
Subsurface No. of exact length width of depth of the ditches of each ditch ft. ditches ft. ditches in. Mr	1×
French Drain Required: Linear feet	
Date: 2/4/2000	
This permit is subject to revocation if site Signed: Signed:	
plans or intended use change. Environmental Health Specialist	
*Maintain set becks -5 -5 -8	
+ Run lines on contour	
*D: tches to be NO	
DEEPER Han 8	
18 inches	
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HARNET OUNTY HEALTH DEPARTMENT AUTHORIZATION TO CONSTRUCT

Owner or Authorized Agent		
Name: Currin Builders Inc	Telephone # 639-6989	
Address: 6390 Winderly Rd. Willow Springs NC 27597		
Property Location: SR #	Road Name J was Agrais	
New Installation Repair Septic Tank Nitrification Lines		
Subdivision Kinis Creek	Lot # _ 2 4	
Number of Bedrooms Proposed:	Lot size:	
Basement With Plumbing	Without Plumbing	
Water Supply: Well Public	Minimum Well Setback: ft.	
Type of System: Conventional Other		
Tank Volume: Septic Tank/ gallons	Pump Chamber gallons	
Nitrification Field Specifications		
Number of fields/ Number of Lines per Field/ Length of lines/\infty Ff.		
Width of ditches ft. Depth of ditches / 8 inches ^ AV		
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.		
Name: Authorized Agent for Harnett County Health De	Date: 2 /4/2000	
(Revised 2/96)CNSTRCT.WPD	8	