NETT COUNTY HEALTH DEPARTIENT

Nº 17116

IMPROVEMENT PERIVIT

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) Wellows Realty INC Property Location: SR# 1703 Red Holl Church Repairs New Installation Repairs Nitrification Line
Property Location: SR# 105 160 HTM Chance Repairs Nitrification Lin
Subdivision Hanvest Gnove Phs Z Lot # 8
Tax ID # Quadrant #
Number of Bedrooms Proposed: Lot Size:
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: Conventional Other
Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of ditches 3 ft. ditches 18-20 in.
French Drain Required: Linear feet
This permit is subject to revocation if site plans or intended use change. Date: 4-25-00 Signed: 4-25-00 Environmental Health Specialist
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Owner or Authorized Agent
Name: Wellows Realty INC Telephone # 910-892-3123
Address: PO BOX 730 DUNN N.C. Z8335
Property Location: SR# 1703 Road Name Red Hall Church
New Installation Repair Septic Tank Nitrification Lines
Subdivision Harvest Grove Phs II Lot#
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
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: E MAN hast Date: 4- 25 - 00 Revised 2/96) CNSTRCT. WPD