00-011361

HARNE COUNTY HEALTH DEPARTMENT

Nº17782

IMPROVEMENT PERMIT

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." New Installation Septic Tank Name: (owner)_ appt ☐ Repairs Property Location: SR# ☐ Nitrification Line Subdivision rade-____ Lot #__ Tax ID #____ _____ Quadrant # _ Number of Bedrooms Proposed: Lot Size: Basement with Plumbing: Garage: Water Supply: ☐ Well Public ☐ Community 50 mi- ft. Distance From Well: 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: __/coc_ gallons Pump Tank: _____ gallons Subsurface No. of exact length width of depth of of each ditch 230 ft. ditches_ ft. ditches 18.30 in. Drainage Field ditches_ French Drain Required: _____ Linear feet Date: _ This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist * Maisting set backs * healines on contever * Ditches + be NO DEEPER 120 on 20 inches 154 50 30

Road

HARIETT COUNTY HEALTH DEPARTMENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 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	
0	Telephone # 894-3495
Address: P.G. Pox 765 Be sa NC 27504	
Property Location: SR#	Road Name Festus
New Installation Repair Septic Tank Nitrification Lines	
Subdivision Indexs Bluff Phs. I	Lot #
Number of Bedrooms Proposed:	Lot size:37A
Basement With Plumbing	Without Plumbing
Water Supply: Well Public	Minimum Well Setback: 50 ft.
Type of System: Conventional Other	
Tank Volume: Septic Tank/CCC_ gallons	Pump Chamber gallons
Nitrification Field Specifications	
Number of fields/ Number of Lines per Field/ Length of lines 230 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.	
Name:M	
Revised 2/96)cnstrct.wpd	