## HARNET

## DUNTY HEALTH DEPARTMENT

Nº17429

## **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 M Septic Tank Name: (owner) Property Location: □ Repairs Nitrification Line Subdivision Lot# Tax ID #\_ \_ Quadrant # \_\_\_ Lot Size: 62 AC Number of Bedrooms Proposed: \_ Garage: Mect onsite
Community 12" Max Ditch Depth Basement with Plumbing: Water Supply: Public Public ☐ Well MUST BRING IN 8to 12" of Over Soil Distance From Well: \_\_ Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Other Many to who Shallow Type of system: ☐ Conventional Septic Tank: 1000 gallons Pump Tank: 1000 gallons Size of tank: Subsurface width of exact length depth of of each ditch / Drainage Field ditches ft. ditches ft. ditches \_\_\_ French Drain Required: \_ \_ Linear feet 1-11.2000 This permit is subject to revocation if site Signed: \_ plans or intended use change. Environmental Health Specialist NOTE Change location Lot 35 Meet onsite 305 for Final Lagost Must Bany In Stoll' of Cover so.1 DO NOT DRIVE OR PARK ON SUP! C System

## HA ETT COUNTY HEALTH DEPAI ENT AUTHURIZATION TO CONSTRUCT

	ct a wastewater system to the specifications described ement Permit # 17429
	years from the date of issuance. This authorization
Owner or Authorized Agent Phy Grove Qu.	
Name:	Telephone # 499-18 4
Address:	
Property Location: SR #	Road Name
New Installation Repair S	eptic Tank Nitrification Lines
	Lot #
Number of Bedrooms Proposed: 3(27x76)	Lot size: _ 6 Q AC
Basement With Plumbing	5
Water Supply: Well Public	Minimum Well Setback: ft.
Type of System: Conventional Other	
Tank Volume: Septic Tank 1000 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	
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: Date: Date:	
(Revised 2/96)CNSTRCT.WPD	