HAR T COUNTY HEALTH DEPARTM

Nº 17540

IMPROVEMENT PERMIT

Name: (owner) Cond all W. Smith Repairs Nitrification Lin Subdivision SR# MS Act Repairs Nitrification Lin Tax ID # Quadrant # Quadrant # Number of Bedrooms Proposed: Lot Size: Y. 447 Act Basement with Plumbing: Garage: Community Distance From Well: Public Community Distance From Well: MS Community Distance From Well: OO 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: OO gallons Subsurface No. of exact length width of depth of Drainage Field ditches of each ditch OO ft. This permit is subject to revocation if site Plate: Date: Size MS Size This permit is subject to revocation if site Plate: Date: Size Size And All State Size Size And All State Size Size Size Size And All State Size Size Size Size Size And All State Size Size Size Size Size Size And All State Size And All State Size Size	tion of any building at which a septic tank system is to be used for dis from the Harnett County Health Department."		
Subdivision Lot # Quadrant # Number of Bedrooms Proposed: Lot Size: J. 447 Ac Basement with Plumbing: Garage: Water Supply: Well Public Community Distance From Well: JOO 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: JOO gallons Pump Tank: gallons Subsurface No. of exact length width of depth of Drainage Field ditches of each ditch Linear feet This permit is subject to revocation if site plans or intended use change. **Manda all retbacks** **A Manda a		New Installation	Septic Tank
Tax ID #	Property Location: SR# 1443 LaFayette Rd.	_ Repairs	Nitrification Line
Tax ID #	Subdivision_Randall Sni. H	Lot	#
Number of Bedrooms Proposed: Basement with Plumbing: Water Supply: Well Public Community Distance From Well: 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: Subsurface No. of Drainage Field ditches of each ditch of each ditch This permit is subject to revocation if site plans or intended use change. **Manches all retrocks** **	Tax ID #	Quadrant #	
Water Supply: Well Public Community Distance From Well: /OO ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other	Number of Bedrooms Proposed:	Lot Size: 4.447 A	C
Distance From Well:	Basement with Plumbing: Garage:	3	
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other	Water Supply: Well Public Community		
This permit is subject to revocation if site plans or intended use change. **Monation all retbocks** **A Ditales to be NO DEEPER Thus 18 in characters. **Purp of system: **Dood gallons** **Doubt Tank:	Distance From Well:ft.		
Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons Subsurface No. of exact length width of depth of ditches of each ditch for the ditches of the dit	iinai approval.		
Subsurface Drainage Field Linear feet Date: Signed: Environmental Health Specialist Full States Putt			
This permit is subject to revocation if site plans or intended use change. **Maintain all retbacks** ** fun diletes on contour **Ditcles to be NO DEEPER Thur 18 inches** **Put **			
This permit is subject to revocation if site plans or intended use change. **Maintain all retbacks** ** funditches** **Ditches** **Put **	Drainage Field No. of exact length of each ditch /00	width of def. ft. ditches ft. di	epth of tches 18 in.MAX
This permit is subject to revocation if site plans or intended use change. **Maintain all retbacks** ** Kun all thes on contour **Ditcles to be NO DEEDER Them 18 inches		1/	
plans or intended use change. * Maintain all retbacks * fun ditches on contour * Ditches to be NO DEEDER Than 18 inches	Date: _	8/15/2000	1.6
* Maintain all retbacks * fun ditches on contour * Ditches to be NO DEEDER Thom 18' nobes Puth STATE Discourse Puth STATE Discourse Advances Puth			L.J.
* Funditches on contour * Ditches to be NO DEEPER Them 18'inches Puth Six		Environmental Heal	ith Specialist
Then 18' nickes Puth Adam 65878 Division			
Then 18' nickes Puth Adam 65878 Division	* Ditches to be NO DEEPER		In]
44 June 35 June 33 Jun			1/49
	w Puth	_ /	11/
	—	/	//
	House 38	134	
woo the series of the series o	65×18 ×	Dive 3	
wo the series			
· wo the contract of the contr	Ya		
	· wo to	LPP Repair	
Pond " "	Pond " ()		

HAMIETT COUNTY HEALTH DEPA_MENT 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			
Name: Randall w. Snith	Telephone # 919-552-4075		
Address: 1190 Latay ette Rd Fugury Varine NC	27526		
Property Location: SR # Road	Name Latingette		
New Installation Repair Septic Tank	Nitrification Lines		
Subdivision Rundall w. Jn. th	Lot #		
Number of Bedrooms Proposed: Lot size:	4.447Ac		
Basement With Plumbing Without Pl	umbing		
Water Supply: Well Public Minimum We	ell Setback:ft.		
Type of System: Conventional Other			
Tank Volume: Septic Tank /OUG gallons Pump Cha	amber gallons		
Nitrification Field Specifications			
Number of fields Number of Lines per Field Length of lines 100 ff.			
Width of ditches ft. Depth of ditches inches MAX			
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: Date: Date:	5/15/2000		