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## HAPNETT COUNTY HEALTH DEPARTMENT

....PROVEMENT PERI....

Nº 13766

Name: (owner) William Median	New Installation	Septic Tank
Property Location: SR# 1463 Coko bory Rd.	<del>-</del> 0	Nitrification Line
Subdivision Kinton d		
Tax ID #	Quadrant #	
Number of Bedrooms Proposed: I	ot Size: . LIAc	
Basement with Plumbing: Garage:		
Water Supply: Well Public Community  Distance From Well: 50 6 ft.		
Following is the minimum specifications for sewage disposal sy final approval.  Type of system: Conventional	stem on above captioned	
Size of tank: Septic Tank:/OSO gallons F	, ,	
Subsurface No. of exact length of each ditch of each ditch	width of d ft. ditches3 ft. d	epth of itches 18 in. MAL
French Drain Required: Linear feet  Date:	2/8/2000	
This permit is subject to revocation if site Signed:	3 .AC	alth Specialist
* Maintain Setbacks		
* Ditcher to be NO DEEPER  Than 16 inches  * Contractor to ment-on-site  prior to installing system  o 181	food 10	1
1 1 1 5 1 E	CPC Repair	

## HARITT COUNTY HEALTH DEPARTMENT AUTHOLIZATION TO CONS1\_JCT

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: William Medinas	Telephone # 919-773-0417	
Address: 1124 Polo Drive Releip N.C. 27607		
Property Location: SR #	Road Name Co Ker berry	
New Installation Repair Septic Tank Nitrification Lines		
Subdivision K. atwood	Lot #	
Number of Bedrooms Proposed: Lot size:	. 61 Ac	
Basement With Plumbing With	out Plumbing	
Water Supply: Well Public Minimu		
Type of System: Conventional Other Polystyrene Agregate Trenchofuster I WWS-95-3 R		
Tank Volume: Septic Tank/@0 gallons Pump Chamber/@0 gallons		
Nitrification Field Specifications		
Number of fields/_ Number of Lines per Field	Length of lines 80 ft.	
Width of ditches ft. Depth of ditches /8 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.		
Authorized Agent for Harnett County Health Department		
Name: Buyo Mywa: R.S. Date	: 2/8/2006	
Revised 2/96) CNSTRCT WPD		