HARN COUNTY HEALTH DEPARTME

IMPROVEMENT PERMIT

Nº 19051

2-5-4410 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."

Name: (owner) Kaber Cree New Installation Septic Tank
Property Location: SR# N(QY/Q) Repairs Nitrification Lin
Subdivision The HighLand & Sherwool Forest Lot # 20
Tax ID # Quadrant #
Number of Bedrooms Proposed: 3 (28 x 60) Lot Size: 52 Ac
Basement with Plumbing: Garage:
Water Supply:
Distance From Well:ft.
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.
Type of system: Other Other
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface Drainage Field No. of depth of ditches ft.
French Drain Required: Linear feet
This permit is subject to revocation if site plans or intended use change. Date: 18-52 Signed: Environmental Health Specialist
Environmental Treatin Specialist
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Authorization is hereby given to construct a wastewater system to the specifications described by
Harnett County Health Department, Improvement Permit # 19051. 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.
Robert Cieni 499- 24211
Name Telephone #
Address
N(24/27
Property Location SR# Road Name
The High And, @ Showard Fest 20 3 (28x60) 152 mg Subdivision Lot # Bedrooms Proposed Lot size
Subdivision Lot # # Bedrooms Proposed Lot size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank [] Nitrification Lines
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[] Conventional Other
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public - Minimum Well Setback:Ft.
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines 245 Ft.
Width of ditches $\frac{3}{12}$ ft. Depth of ditches $\frac{3}{12}$ 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.
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Date

Signature of Authorized Agent for Harnett County