HARNETT COUNTY HEALTH DEPARTMET

IMEROVEMENT 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) Property Location: ☐ Repairs Nitrification Line Subdivision Tax ID #_ _____ Ouadrant # _____ Lot Size: 074 AC Number of Bedrooms Proposed: Basement with Plumbing: Garage: 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: _____ gallons Pump Tank: _____ gallons exact length Subsurface of the ditches width of depth of of each ditch Drainage Field ditches French Drain Required: _____ Linear feet 350 Date: This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist 73 N(24/27 Hannah Wri Dave 1x 350 20 140' 27x76 3BR LPP Pyrain Place house Along old Road Bed. STUB Out Plumbing Shallow 255 18" Atch Droth No Driving or Parting on systic system Maintain All sch Backe

HA IT COUNTY HEALTH DEPARTMEN AUT RIZATION TO CONSTRUC

Authorization is hereby given to construc	at a wastewater system to the specifications described by
	provement Permit # \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
This authorization will be invalid if owners	
Plan Copper David	1190 m. 1
Name	498-2207 Telephone #
Address	
0	
Property Location SR#	Road Name
Wood Bridge	34 3(27476) .74AC
Subdivision	Lot # # Bedrooms Proposed Lot size
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and the Marian Wales of the Architecture (T	YPE OF SYSTEM
[] New Installation [] Repair [] Septic	Tank Nitrificiation Lines
0	
LConventional Other	[]Basement []With Plumbing [] Without Plumbing
Water Supply: [] Well Public - Minimum Well Setback: 50 Ft. Septic Tank Pump Chamber	
. /	
MIRIFICAL	TION FIELD SPECIFICATIONS
Number of fields# of lines per fiel	350 -
# of lines per fields	id Length of lines Ft.
Width of ditchesft. Depth of ditc	ches // inches
French Drain: Linear feet required	Depth of gravel
No mostometer and a chall be	
inspection by the Harnett County I	covered or placed into use by any person until an Health Department has determined that the system
has been installed according to the	e conditions of the Improvement Permit and that a
valid Operations Permit has been issued.	
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(by WKN9	12-10-02
Signature of Authorized Agent for Harnett County	Date