03-5-6327

## HARNTT COUNTY HEALTH DEPARTM

Nº 19826

## 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."

Name: (owner) Amy Hynps	New Installation Septic Tank
Property Location: SR# 1128 DARROCH RO	
Subdivision	I at # 2
Tax ID #	
Number of Bedrooms Proposed:	
Basement with Plumbing:   Garage	
Water Supply: Well Public Commit	
Distance From Well:ft.	unity
Following is the minimum specifications for sewage dispo final approval.	sal system on above captioned property. Subject to
Type of system: Conventional Other	PUMP TO CONVENTIONAL
Size of tank: Septic Tank: 1000 gallons	Pump Tank: 1000 gallons
Subsurface No. of exact length of each ditch	width of depth of the ditches 18 in.
French Drain Required: Linear feet	
Dat	e: 2/7/03/1
This permit is subject to revocation if site	ned: RS COLIVER TOLKSDORF
plans or intended use change.	Environmental Health Specialist
* MAINTAIN ALL SETBACK	
	DRAMING
+78' TO P-BOX IS FROM	
EDGE OF ROAD	
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## HARN COUNTY HEALTH DEPARTM I AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 19826 . 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.				
Amy HYNOS			D14-2785	
Name		The state of the s	814 - 2285 Telephone#	
413 COUNTRY COVE	LN. LILLI	NETON NC	27546	
1128 DAGGOC	H RO			
Property Location SR#			Road Name	
	2		10.07AC	
Subdivision	Lot #	# Bedrooms Proposed	Lot Size	
TYPE OF SYSTEM				
New Installation [ ] Repair				
[] Conventional MOther Pump To Conventional				
[ ] Basement [ ] With Plumbing [ ] Without Plumbing				
Water Supply: [ ] Well Public Water Supply Minimum Well Setback: 100 Ft.				
Septic Tank 1000 gol Pump Chamber 1000 gol				
NITIRFICATION FIELD SPECIFICATIONS				
Number of fields # of lines per field Length of lines Ft.				
Width of ditches ft. Depth of ditches leads inches				
French Drain: Linear feet required Depth of gravel				
No wastewater system shall be co	vered or placed	into use by any nersor	until an inspection by the	
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.				
			THE RESERVE OF THE PROPERTY OF	
WITH THE			1 1	
Signature of Authorized A - 4 C	RS		2/7/03	
Signature of Authorized Agent for Harnet	county of Harnett		Date	