## Nº 19248

## INPROVEMENT 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) Clyde l'Atterson I Way Mangum New Installation Septic Tank
Property Location: SR# NC at 127 Repairs Nitrification Line
Subdivision BURTON ACRES Lot # 3
Tax ID # Quadrant #
Number of Bedrooms Proposed: 3(14x66) Lot Size: 1.12 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: Conventional Other
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length of exact length of each ditches ft. width of the ditches ft. ditches ft. ditches ft. ditches ft.
French Drain Required: Linear feet
Date: 04-10-03
This permit is subject to revocation if site plans or intended use change.  Date: 04-10-3  Signed: Priving mental Health Specialist
Environmental Health Specialist
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## HARNELL COUNTY HEALTH DEPARTMENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 19 218 . 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,
Clode Patterion / Wan Mayon 258-5538
Name Telephone#
Address
WC 24/27 Property Location SR# Road Name
Property Location SR#  Road Name
Berton Acas 3 3(14x66) 1.12m
Subdivision Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [ ] Repair [ Septic Tank [ Nitrification Lines
Septic Tank ( Swittingation Lines
[ ] Other
[ ] Basement [ ] With Plumbing [ ] Without Plumbing
Water Supply: [ ] Well [Public Water Supply Minimum Well Setback:Ft.
Septic Tank 1020 gd Pump Chamber gd
NITIRFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines Ft.
Width of ditches ft. Depth of ditches 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.
(/2 LAM) N4-10-07
Signature of Authorized Agent for Harnett County of Harnett  Date