HARN COUNTY HEALTH DEPARTME

HTE 03-5-7196R

IM. ROVEMENT PERMIT

21350

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) Charles Burgess New Installation Septic Tank Property Location: SR#__N(27 Nitrification Line Repairs Subdivision Decr Croft Lot # Tax ID # Ouadrant # Number of Bedrooms Proposed: 3 (28176) Lot Size: 9.4/Ac Garage: This change In house location

Community Should keep from the we of a pump.

Ot At Ground level or higher I first Pump may be Basement with Plumbing: Water Supply: Well N Public Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional Other Type of system: Septic Tank: | gallons Pump Tank: gallons Size of tank: exact length of each ditch 405 ft. Subsurface No. of width of depth of ditches \\ \ in. Drainage Field ditches ditches Linear feet French Drain Required: Signed: This permit is subject to revocation if site plans or intended use change. Environmental Health Specialist IPP Repair 28×76 MH 60 EASEMENT Meet onsite Before Enstalling State STITEM Erong Pucper
Plumbing must be Stubbed out At Ground level or higher - If
Not Pump Still May Be Required Maintain All set Backs OD not DENE ORPARK ON Septic System

AUTHORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit # 2\350 This
This authorization will be invalid if ownership, site plans, or intended use of issuance.
Charles Burgess Name
Telephone #
Address NC2
Property Location SR#
Deca Croft Est 6 3(28x76) Subdivision Lot# Road Name 9.41 M
Subdivision Lot # # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
[New Installation [] Repair [Septic Tank [Nitrification Lines
Conventional [] Other
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public Water Supply Minimum Well Setback: 50 Ft.
Septic Tank / OO gal Pump Chamber gal
NITRIFICATION 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
The or Bravel
No wastewater system shall be covered or placed in 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.
Signature of Authorized Agent for Harnett Country
Signature of Authorized Agent for Harnett County Date