HTE 03-5-7682

HAR! I COUNTY HEALTH DEPARTM

IMPROVEMENT PERMIT

20251

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) Ferri Cicai	_ New Installation Septic Tank
Property Location: SR# NC 34127	_ □ Repairs
Subdivision The HighLands @ Sherwood Forest	Lot # _ 45
Tax ID #	Quadrant #
	Size: , 64AC
Basement with Plumbing: Garage: 🗖	
Water Supply: Public Community	
Distance From Well: 50 ft.	
Following is the minimum specifications for sewage disposal sy to final approval.	
Type of system:	to Conventional
Size of tank: Septic Tank: OSS gallons Pump	Tank: /000 gallons
Subsurface No. of exact length of each ditch 120 ft.	width of depth of ditches 18 at in.
French Drain Required:Linear feet	0.4
Date:	08-19-03
This permit is subject to revocation if site Signe	ed: Our WARS
plans or intended use change.	Environmental Health Specialist
LER DIANK IT	132'
/ Inda	
G. 3BR 61	6x42
80.	62'
93	/181
Maintain All setBacks	/
All sctBacks	
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OR park on septic 12 115	
System Road	
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Breeze Court	Ý
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HARNETT COUNTY HEALTH DEPARTI IT AUI ORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 2025 . This authorization shall be valid for a period not to construct a wastewater system to the specifications described.		
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.		
Tem Cieni 499-2424		
Telephone#		
Address N(2 1/27) Property Location SR# Road Name		
The Highlands @ Sherwood Furest 45 3(66x42) Road Name Subdivision Lot # Bedrooms Proposed Lot Size		
Subdivision Lot # Bedrooms Proposed Lot Size		
TYPE OF SYSTEM		
New Installation [] Repair		
[] Conventional [] Repair [4] Septic Tank [Nitrification Lines		
[] Basement [] With Plumbing [] Without Plumbing		
Water Supply: [] Well Public Water Supply Minimum Well Setback: 5 Ft.		
Septic Tank 9d Pump Chamber 9d		
NITIRFICATION FIELD SPECIFICATIONS		
Number of fields # of lines per field \(\sigma\)		
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.		
8-19-07 (Johns) (1-19-03		
Signature of Authorized Agent for Harnett County of Harnett Date		