HARN COUNTY HEALTH DEPARTME

HTE 04-5-8597R

IMPROVEMENT PERMIT

20704

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) BILLY LONG New Installation Septic Tank Property Location: SR# Hwy 210 Nitrification Line Lot # ____ Subdivision Quadrant # Tax ID# Number of Bedrooms Proposed: 3 Lot Size: Basement with Plumbing: Garage: 2 Public ☐ Well Water Supply: Community Distance From Well: 50 ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. DOTHER PUMP TO 25% REDUCTION SYSTEM ☐ Conventional Type of system: Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons Subsurface No. of exact length depth of width of ditches 3 ft. ditches 18-22 in. ditches 1 of each ditch 170 ft. Drainage Field French Drain Required: Linear feet Date: 227K RS (OLIVER TOLKSODE This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist 159' DRAWING NTS * MAINTAIN ALL SETBACKS * CALL WITH ANY QUESTIONS 65' PRIOR TO INSTALLATION 28' × 76' 293 D R FILL REPAIR

HARNETT CONTY DEPARTMENT OF PUB HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 04-5-8597 R . 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.

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BILLY LONG		919-630-0408
Name		Telephone #
HWY 210 LILLINGTON N	10 27546	
Address	00 2.010	
Hwy 210 Property Location SR#		
Property Location SR#]	Road Name
	3	
Subdivision Lot #	# Bedrooms Proposed	Lot Size
<u>TY</u>	PE OF SYSTEM	
New Installation [] Repair	Septic Tank Nitri	fication Lines
[] Conventional \bowtie Other ρ_{vmp}	To 25% REDUCT.	ON SYSTEM
[] Basement [] With Plumbing []	Without Plumbing	
Water Supply: [] Well Public V	Water Supply Minimum W	ell Setback: 50 Ft.
Septic Tankgal	Pump Chamber)	OOO gal
NITRIFICATIO	ON FIELD SPECIFIC	ATIONS
Number of fields# of lines p	per field \\ Lengtl	of linesFt.
Width of ditches ft. Depth of	f ditches 18-22 inches	S
French Drain: Linear feet required	Depth of gravel	
No wastewater system shall be covered or	r placed into use by any pe	rson until an inspection by the
Harnett County Health Department has do the conditions of the Improvement Permit	etermined that the system be t and that a valid Operation	has been installed according to as Permit has been issued.
hold I		
Simple of Authority A 15 H		2/24/04
Signature of Authorized Agent for Harnett County	y	' Date