## HTE 045-9877

## HARN COUNTY HEALTH DEPARTMI

**IMPROVEMENT PERMIT** 

20869

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construc-

tion of any building at which a septic tank system is to be used for disposal from the Harnett County Health Department."	-
Name: (owner) Terri Cicri	New Installation Septic Tank
Name: (owner) Terri Cicri  Property Location: SR# Nc24/27	Repairs Nitrification Line
Subdivision The HighLands Q Sherwood Forcet	
Tax ID #	
Basement with Plumbing:	<i>&gt;</i> >
Water Supply:	
Distance From Well: 50 ft.	
Following is the minimum specifications for sewage disposal sy to final approval.	
Type of system:	
Size of tank: Septic Tank: gallons Pump	Tank: \\Sigma gallons
Subsurface No. of exact length of each ditch 20 ft.	width of depth of ditches 18-24 in.
French Drain Required:Linear feet Date:	07-13-04
This permit is subject to revocation if site Signed	1: On when
nightiar intanded like change	Environmental Health Specialist
Selectarial Box 179'	They
	1130 113 113
24/127	m n made
	35 6
384	1
36 NO.	1   e
100	l l l l m
Lower tas 1960 on	
lugar I mparis	1
	12 436
DFS	110
£ 60 >	Orange
DENE 11	1
STUB out Plumbing shallow W	here shown - Meet ansite
MAY not Require purp. Key drain L.	ne, 30 fasm Rear property
Box Line	

## HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTTORIZATION TO CONS' JCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 20869
and the state of t
ownership, sue plans, or intended use change
TERRI Cieni
Name
Telephone #
Address
NC24/27
Property Location SR#  Road Name
Subdivision Sherwood Lot# #Bedrooms Proposed Lot Size
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 gal Pump Chamber gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines 200
Number of fields # of lines per field Length of lines 200 Ft.  Width of ditches
French Drain: Linear feet required Depth of gravel
No wastewater quaters also 11.1
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 by
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.
Operations Permit has been issued.
(107 (120A-RS
Signature of Authorized Agent for Harnett County
Date