## HARN COUNTY HEALTH DEPARTME

## HTE 04-5-10135R IM. ROVEMENT PERMIT

21251

Be it ordained by the Harnett County Board of tion of any building at which a septic tank system is to l from the Harnett County Health Department."	Health as follows: Some used for disposal of	ection III, Item B. "No P of sewage without first ob	erson shall begin constru taining a written permit
Name: (owner) Juniakae Monsell		New Installation	Septic Tank
Property Location: SR#	L	☐ Repairs	Nitrification Lin
Subdivision Rouse Roust		Lot	#_ /2
Tax ID #		Quadrant #	
Tax ID #	Lot Siz	ce: 5.06 Ac	
Basement with Plumbing:			
Water Supply:	Community		
Distance From Well: 50 m- ft.	-		
Following is the minimum specifications for se to final approval.			
Type of system:	Other Tir Ch	. p5	
Size of tank: Septic Tank: 1000 ga	llons Pump	Tank:gallons	
Size of tank: Septic Tank: 1000 ga  Subsurface No. of exact length  Drainage Field ditches 4 of each ditches	ch_ <i>F</i> 0_ft.	ditches 3 ft.	depth of ditches 18-24 in.
French Drain Required:Linear	feet Date:_	Environmental H	
This permit is subject to revocation if site	Signed	: Sugar Mc/	van RS.
plans or intended use change.		Environmental H	lealth Specialist
* Maintain all retbacks	420		
* Non ditcher on contour	120		
x3			
3			
		655	
		830	
	1 212 MA		
	20 42	121	
	ileas 1	7	
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	pomp V	
		per 10	
	367		* Not to reale
			.,

## HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUT... ORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit # 2/25 . 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.			
Name Page Mondell 919-631-0408 Telephone #			
300 Mickey Rospehn. Comera NC \$306			
Property Location SR#  Road Name			
Lower Lorst 12 4 5.06 Ac Subdivision Lot # Bedrooms Proposed Lot Size			
TYPE OF SYSTEM			
[ New Installation [ ] Repair			
[] Conventional [] Other Tier Chief or Chambe			
[ ] Basement [ ] With Plumbing [ ] Without Plumbing			
Water Supply: [ ] Well [ Public Water Supply Minimum Well Setback:Ft.			
Septic Tankgal Pump Chambergal			
NITRIFICATION FIELD SPECIFICATIONS			
Number of fields# of lines per field# Length of linesFt.			
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.			
Signature of Authorized Agent for Harnett County  Date			