HTE# 05-500 12729

## 12731 IMPROVEMENT PERMIT 22721

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." New Installation Septic Tank Repair Name: (owner) Terri Cicai Property Location: SR# N° 24/27

Subdivision The Ridge & Sherward Forest

Nitrification Line Expansion Lot # Lot # Tax ID# Quadrant #

Number of Bedrooms Proposed: 4(76x4s) 410 fc Lot Size: 93 Basement with Plumbing: Garage: Garage: Water Supply: Well Public Community Distance From Well: 53 Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other Many to Conventional Size of tank: Septic Tank: 1200 gallons Pump Tank: 1200 gallons No. of ditches 3 ft. of each ditch 1 5 ft. ditches 5 ft. depth of ft. ditches 18-24 in. Subsurface Drainage Field French Drain Required: Linear feet Date: 08-05 This permit is subject to revocation if site PERMIT EXPIRES 5 YEARS FROM ABOVE DATE plans or intended use change. Must onsite Maintain All set Back Signed: Environmental Health Specialist Wike Farice 86 25

198

## AUTHORIZATION TO CONSTUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 201 ( . 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 Telephone #
Address NC24/27
Property Location SR#  Road Name  Road Name  The Road Name  For Contract Co
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines  [] Conventional Nother Pump To Convolution
[ ] Basement [ ] With Plumbing [ ] Without Plumbing
Water Supply: [ ] Well Public Water Supply Minimum Well Setback: 50 Ft.
Septic Tank gal Pump Chamber gal gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields# of lines per field
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 in the control of the county Health Department has determined that the system has been in the control of the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined that the system has been in the county Health Department has determined the county Health Department has determine
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  D8 - 08 - 05