HTE# 05-50013144R

IMPROVEMENT PERMIT 22237

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) RICHARD CARLYZE THOMPSON New Installation & Septic Tank & Repair	
Property Location: SR# 2039 Mike Williams L. Nitrification Line Expansion	
Subdivision Lot #	
	,
Number of Bedrooms Proposed: 3 (36096) Lot Size: 10.63 Nc	
Basement with Plumbing: Garage:	
Water Supply: Well Public Community	
Distance From Well: ft.	
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.	
Type of system: Conventional Other Pump To INNOVATIVE	
Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons	
Subsurface No. of exact length width of depth of Drainage Field ditches 4 ft. of each ditch 75 ft. ditches 3 ft. ditches 18 in.	*/.
Drainage Field ditches $\ \ \ \ \ \ \ \ \ \ \ \ \ $	
French Drain Required:Linear feet	
This permit is subject to revocation if site Date: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
plans or intended use change.	
	_
* MAINTAIN ALL SETBACKS Signed: RS (OLIVER TOLKSO	28E)
Environmental Health Specialist	
COMPLETE STATE	3
10 1000	
# CALL WITH ANY QUESTIONS PRIOR TO	
INSTANCE IN THE PROPERTY OF TH	
198	
LIBLI DOWN FOWER INNOV. C	
REPAIR	
Exist.	
MIXE	
DR COS	
Ě	

HARNETT COUNTY DEPARTMENT OF PUBLIC 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 # 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.
RICHARD CARWILE THOMPSON 454-5646 Telephone #
701 THOMRSON RD GARNER NC 27529 Address
2034 Property Location SR# Road Name
Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM
New Installation [] Repair Septic Tank Nitrification Lines
[] Conventional Other Pump To INNOVATIVE SYSTEM
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: Well Public Water Supply Minimum Well Setback: 100 Ft.
Septic Tank 1000 gal Pump Chamber 1000 gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field Length of lines Ft.
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.
11), 105 Date
Signature of Authorized Agent for Harnett County Date