H. NETT COUNTY HEALTH DEPAPTMENT # 0Z-5-4860 Nº 13919

IN PROVEMENT PER....T

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) Kanen Lambert Wew Installation ☑ Septic Tank Nitrification Line Property Location: Subdivision <u>East Mell</u> _____ Lot #____ ______ Ouadrant # _____ Tax ID #_____ Number of Bedrooms Proposed: _____ Lot Size: ____ Basement with Plumbing: Garage: Well ✓ Public Water Supply: ☐ Community Distance From Well: _____ __ft Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional ☐ Other _____ Type of system: Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons Subsurface No. of exact length width of ditches 3 of each ditch 100 ft. ditches 3 ft. ditches 18-24 in. Drainage Field French Drain Required: _____ Linear feet Date: ______ 6-20-02 Signed: Environmental Health Specialist This permit is subject to revocation if site plans or intended use change. HOME DR 60' I 07 4 TO Huy 42' Enstmell La.

HA TT COUNTY HEALTH DEPARTMEN AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to co Harnett County Health Department	onstruct a wastew	vater system to the specifica Parmit # /25/4	tions described by	
authorization shall be valid for a p	eriod not to exce	ed five (5) years from the da	ate of issuance.	
This authorization will be invalid if	ownership, site pl	lans, or intended use change	•	
Karala bat		9B-4	92-176-17103	
Name ZITT MAH MEN POND ROAD		Telephone #		
	-			
Address	ND ROAK	<u> </u>	 	
		4		
Property Location SR#		My 4Z Road Name		
East Mz/l b Subdivision Lot #				
ENSTITUTE Subdivision	<i>O</i>	# Padrooms Proposed	Lot size	
Succession	, Lot #	# Degrooms Proposed	Lut Sizo	
	TOTAL COME COME COME COME COME COME COME COME	OV/OTER#		
	TYPE OF S			
[New Installation [] Repair []				
[New Installation [] Repair []	Septic Tank []	Nitrificiation Lines		
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Conventional Other	[]Baseme	ent []With Plumbing [] Wil	thout Plumbing	
	·			
Water Supply: [Well [Public -	- Minimum Well S	etback: /06 Ft.		
Septic Tank <u>/ 0 6 0</u>	Pump C	Chamber		
. NITRI	FICATION FIELI	D SPECIFICATIONS		
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Number of fields # of lines	ner field 3	Length of lines / O Ø	Ft	
			- 1	
Width of ditches 3 'ft. Depth	n of ditches 18-2	y inches		
Width ordinenesit. Depti	i of ditenes 10 D	<u>menes</u>		
	<u>-</u>			
French Drain: Linear feet required	Depth of	f gravel		
No wastewater system shall			_	
inspection by the Harnett Cor has been installed according	_	-		
1	-	ns of the improvement. nit has been issued.	t chint and that a	
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James 2 /Manha	7003	6-Lo-02 Date		
Signature of Authorized Agent for Harnett C	County	Date		