03-5-5433

HARNETT COUNTY HEALTH DEPARTMENT

Nº 19703

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) That for the Property Location: SR# 2009 Property Charles Repairs

Nitrification Line

Subdivision Fred Toology to

Turner (Owner)	The Winstallation Septie Talik
Property Location: SR# 2009	Propert Church & Repairs Nitrification L
Subdivision Fred Tortington	Lot #
Tax ID #	Quadrant #
Number of Bedrooms Proposed:	Lot Size: 14.0/Ac
Basement with Plumbing:	Garage:
Water Supply: Well P	ablic Community
Distance From Well:	ft.
Following is the minimum specification of the final approval.	ons for sewage disposal system on above captioned property. Subject to
Type of system: Conventional	Other
Size of tank: Septic Tank:	oo gallons Pump Tank: gallons
Subsurface No. of Drainage Field ditches	exact length width of depth of of each ditch ft. ditches ft. ditches in.
French Drain Required:	Linear feet / /
	Date: 9/6/2002
This permit is subject to revocation	on if site Signed: Signed: Mywai R.S
plans or intended use change.	Environmental Health Specialist
	1256
	Ro'

CATILITY TOUT

*Maintain all set backs * Renditches on contour 1126

* Notitiscale

Dirt Path

HAI TT COUNTY HEALTH DEPARTMENT AUT__RIZATION TO CONSTRUC.

Harnett County Health Departm authorization shall be valid for a	ent, Improvement Permit # This period not to exceed five (5) years from the date of issuance. if ownership, site plans, or intended use change.
Name 61 Helma St. Angi	919 639 0264
Name	Telephone #
61 Thelma St. Angi	E- N.C. 2754
200 9 Property Location SR#	Prospect Church
	Road Name
Fred Turlinton	8 4 HCIAC
Subdivision	Example 1
	TYPE OF SYSTEM
LINE TO LINE TO LINE TO LINE TO LINE	
New Installation [] Repair	Septic Tank Nitrificiation Lines
Conventional Other	Basement []With Plumbing [] Without Plumbing
Septic Tank/OCO	c - Minimum Well Setback:Ft. Pump Chamber RIFICATION FIELD SPECIFICATIONS
Number of fields# of line	es per field Length of lines Ft.
Width of ditchesft. Dep	oth of ditches
French Drain: Linear feet required	Depth of gravel
inspection by the Harnett C has been installed accordin	all be covered or placed into use by any person until an ounty Health Department has determined that the system g to the conditions of the Improvement Permit and that a Operations Permit has been issued.
Signature of Authorized Agent for Harnes	tt County Date