

HTE 04-50010189

16555

OPERATIONS PERMIT

Name: (owner) LOTTIE DREWRY New Installation Septic Tank
 Property Location: SR# 2027 JOSEY WILLIAMS RD Repairs Nitrification Line
 Subdivision _____ Lot # _____
 Tax ID # _____ Quadrant # _____
 Contractor: OTIS STRICKLAND Registration # _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 100 ft.

Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other _____

Size of tank: Septic Tank: 1550 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 2 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 24 in.

French Drain Required: _____ Linear feet

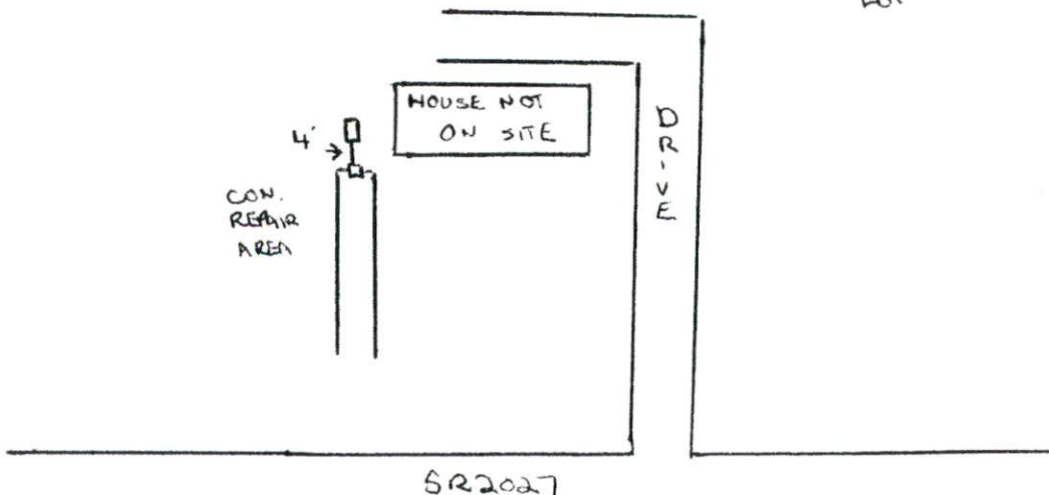
Date: 9/14/04

Inspected by: [Signature]
Environmental Health Specialist

PERMIT NO. 21215

DRAWING NTS

13 ACRE LOT



HARNETT COUNTY HEALTH DEPARTMENT
IMPROVEMENT PERMIT

HTE 04-5001089

21215

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) LOTTIE DREWRY New Installation Septic Tank
 Property Location: SR# 2027 JOSEY WILLIAMS RD Repairs Nitrification Line

Subdivision _____ Lot # _____

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 2 Lot Size: 13.9 ac

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 100 ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other _____

Size of tank: Septic Tank: 1500 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 2 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 24 in. ^{MAX.}

French Drain Required: _____ Linear feet

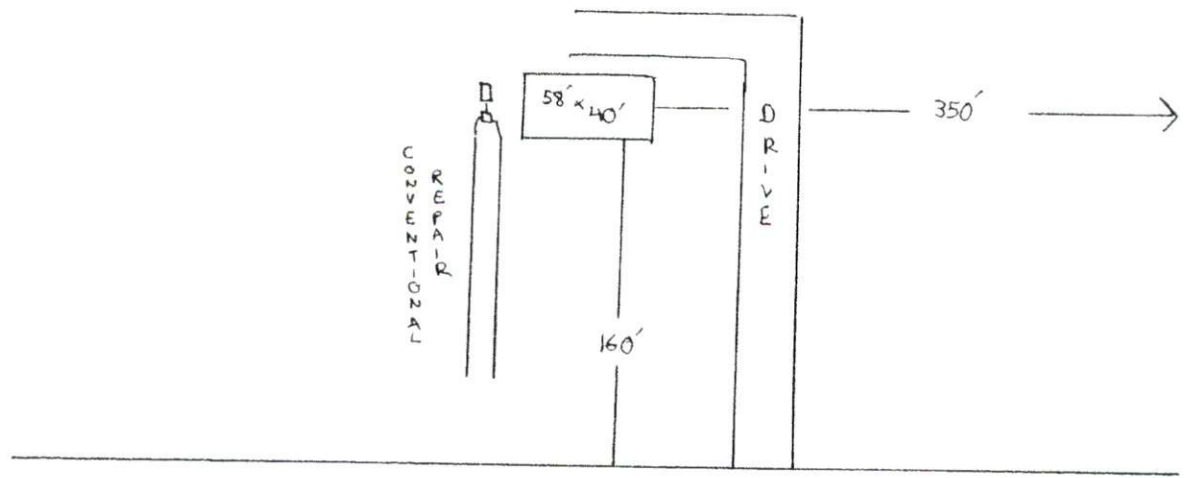
Date: 9/1/04

Signed: [Signature] RS (OLIVER TOLKSDORF)

Environmental Health Specialist

This permit is subject to revocation if site plans or intended use change.

*LARGER SYSTEM REQUESTED BY HOMEOWNER
 *MAINTAIN ALL SETBACKS



SR2027