

HTE# 06-5-142112

# IMPROVEMENT PERMIT 22957

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) TONY SPEARS New Installation  Septic Tank  Repair

Property Location: SR# 2030 McLEAN CH. CH. RD Nitrification Line  Expansion

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_

Tax ID# \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: CARPORT/CATERING BUSINESS Lot Size: \_\_\_\_\_

Basement with Plumbing:  Garage:  (100 yds)

Water Supply:  Well  Public  Community

Distance From Well: 50 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: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

Subsurface Drainage Field No. of ditches 2 ft. exact length of each ditch 40 ft. width of ditches 3 ft. depth of ditches 18 in.

French Drain Required: \_\_\_\_\_ Linear feet

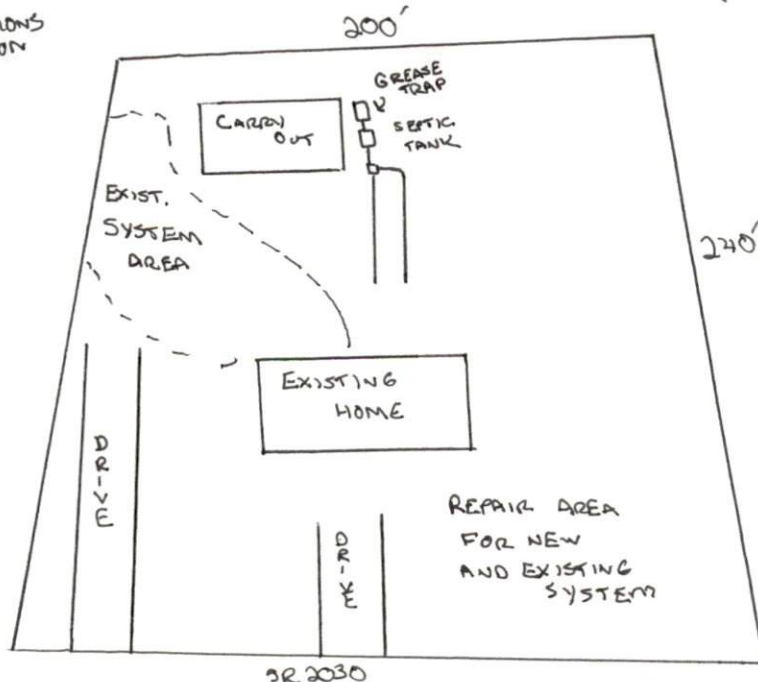
Date: 4/28/06  
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

Signed: [Signature] RS (OLIVER TOLKSDORF)  
Environmental Health Specialist

\* ALL SINKS TO BE TIED INTO GREASE TRAP

\* CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION



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 # 22957. 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.*

TONY SPEARS 893-3593  
Name Telephone #

1334 McLEAN CHAPEL CHURCH RD BUNNLEVEL NC 28323  
Address

2030 McLEAN CHAPEL CHURCH ROAD  
Property Location SR# Road Name

CARRIOUS/CATERER (00000) 1.10ac  
Subdivision Lot # # Bedrooms Proposed Lot Size

**TYPE OF SYSTEM**

New Installation [ ] Repair  Septic Tank  Nitrification Lines

Conventional [ ] Other \_\_\_\_\_

[ ] Basement [ ] With Plumbing [ ] Without Plumbing

Water Supply: [ ] Well  Public Water Supply Minimum Well Setback: 50 Ft.

Septic Tank 1000 gal Pump Chamber \_\_\_\_\_ gal

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 2 Length of lines 40 Ft.

Width of ditches 3 ft. Depth of ditches 18 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.

[Signature]  
Signature of Authorized Agent for Harnett County

4/28/05  
Date