

HTE 05-5002135

# IMPROVEMENT PERMIT

22058

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) CHARLENE CHAPMAN  New Installation  Septic Tank  
Property Location: SR# 2026 BYRDS MILL RD  Repairs  Nitrification Line

EXPANSION

Subdivision COWAN S/D Lot # 7

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

Number of Bedrooms Proposed: 4 Lot Size: 2

Basement with Plumbing:  Garage:

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: EXIST gallons Pump Tank: \_\_\_\_\_ gallons

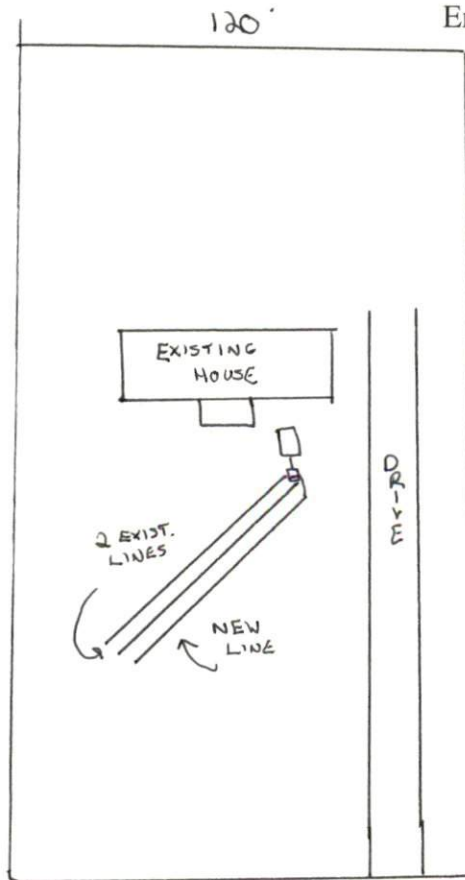
Subsurface Drainage Field: No. of ditches 1 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 24 in.

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

Date: 5/23/05

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

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



\* SYSTEM BEING EXPANDED TO ACCOMADATE ADDITIONAL BEDROOM

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 # 22058. 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.*

CHARLENE CHARMAN 891-7755  
Name Telephone #

PO Box 308 Eemlin NC 28339  
Address

2026 Byers Mill Rd  
Property Location SR# Road Name

CONAN S/O 7 4 2  
Subdivision Lot # # Bedrooms Proposed Lot Size

**TYPE OF SYSTEM**

New Installation  Repair  Septic Tank  Nitrification Lines EXPANSION

Conventional  Other \_\_\_\_\_

Basement  With Plumbing  Without Plumbing

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

Septic Tank EXISTING gal Pump Chamber \_\_\_\_\_ gal

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 1 Length of lines 75 Ft.

Width of ditches 3 ft. Depth of ditches 24 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

5/23/05  
Date