

IMPROVEMENT PERMIT

00-50000435

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) Energy Efficient☒ New Installation ☒ Septic TankProperty Location: SR# Hwy 421☐ Repairs☒ Nitrification LineCattle LaneSubdivision Veronica KubenyLot # Tax ID # 10-0640-0112-01Quadrant # 0640-65-2343Number of Bedrooms Proposed: FOURLot Size: 3.32 acresBasement with Plumbing: ☐Garage: ☐Water Supply: ☒ Well ☐ Public ☐ CommunityDistance From Well: 50 ft.

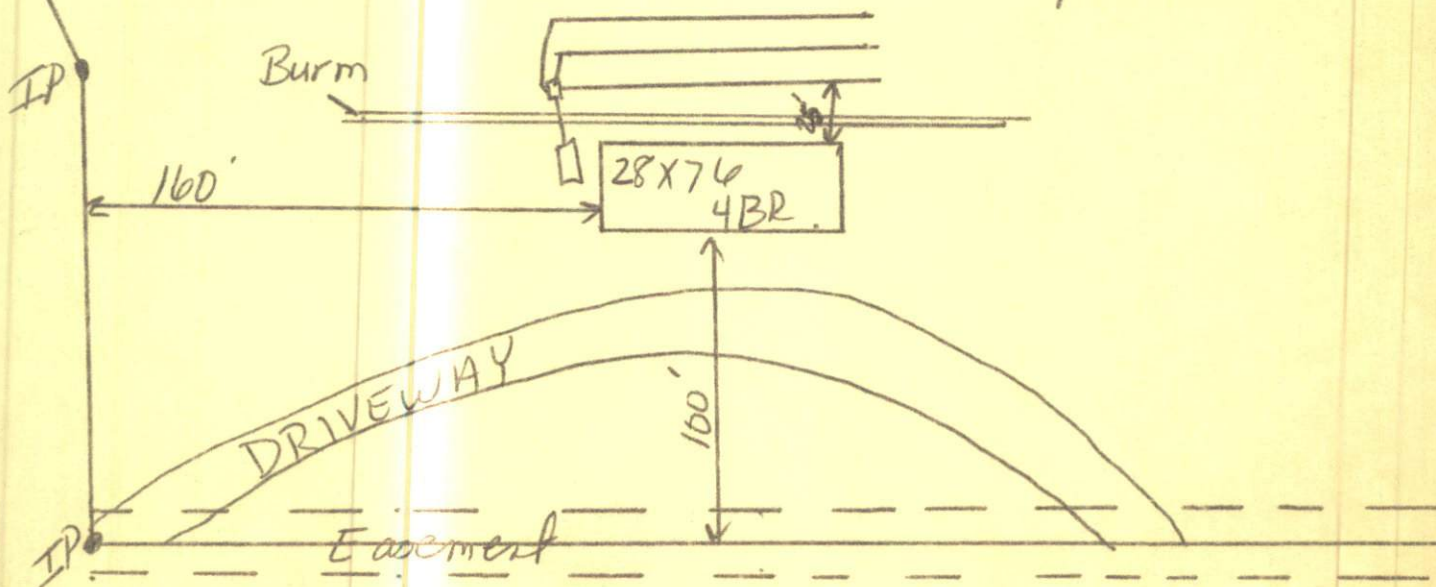
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: ☒ Conventional ☐ Other Size of tank: Septic Tank: 1000 gallons Pump Tank: gallonsSubsurface Drainage Field No. of 3 exact length 100 width of 3 depth of 18
ditches of each ditch ft. ft. ft. ft. in.French Drain Required: Linear feet

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

Date: 25 October 2000
Signed: Vernice R. Rode, R.S.
Environmental Health Specialist

Conv. Repan
Burm
* system laid out
* 50' set back for well
* meet on-site
prior to installation



00-011603

HARNETT COUNTY HEALTH DEPARTMENT
AUTHORIZATION TO CONSTRUCT

00-50000435

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 18138. 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.

Owner or Authorized Agent _____

Name: Energy Efficient Telephone # 662-9235

Address: 5429 Fayetteville Rd. Raleigh, NC

Property Location: SR # Hwy 421 Road Name Hwy 421

New Installation ☒ Repair ☐ Septic Tank ☒ Nitrification Lines ☒

Subdivision Veronica Kubeny Lot # _____

Number of Bedrooms Proposed: FOUR Lot size: _____

Basement _____ With Plumbing _____ Without Plumbing _____

Water Supply: Well ☒ Public ☐ Minimum Well Setback: 50 ft.

Type of System: Conventional ☒ Other ☐

Tank Volume: Septic Tank 1000 gallons Pump Chamber _____ gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 3 Length of lines 100 feet

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.

Authorized Agent for Harnett County Health Department

Name: Venest R. R. S. Date: 25 October 2000