

00-011615

HARNETT COUNTY HEALTH DEPARTMENT

No 18142

IMPROVEMENT PERMIT

DD-50000519

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) Edin Castellanos  New Installation  Septic Tank  
Property Location: SR# 1111 Marks Rd.  Repairs  Nitrification Line  
Marks Rd to Mr Duffie to last home on left  
Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_

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

Number of Bedrooms Proposed: Three Lot Size: \_\_\_\_\_

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: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

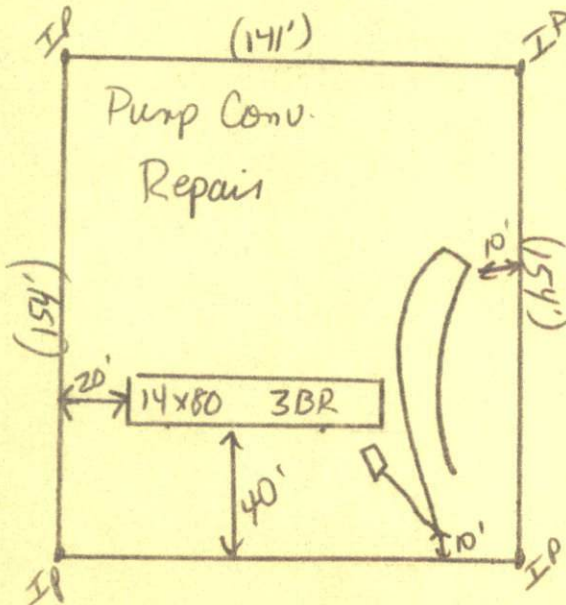
Subsurface Drainage Field No. of ditches 1 exact length 150 ft. width of 3 ft. depth of 18 in. ditches \_\_\_\_\_ ft. ditches \_\_\_\_\_ in.

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

Date: 30 October 2000  
Signed: Vernon R. Dodge R.S.  
Environmental Health Specialist

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

\* system laid out  
\* maintain setbacks  
\* install on contour



HARNETT COUNTY HEALTH DEPARTMENT  
AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 18142. 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: Edin Castellanos Telephone # 499-9516

Address: 481 Mc Duffie Rd. Cameron, NC

Property Location: SR # 1111 Road Name Marks

New Installation  Repair \_\_\_\_\_ Septic Tank  Nitrification Lines

Subdivision \_\_\_\_\_ Lot # 1

Number of Bedrooms Proposed: Three 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 1 Length of lines 150 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: Vincent R. Rody, R.S. Date: 30 October 2006