

IMPROVEMENT PERMIT

5000951

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) Mike Ray
Property Location: SR# 1106
New Installation
Septic Tank
Repairs
Nitrification Line

Subdivision Longhorn EST Lot # 28

Tax ID # Quadrant #

Number of Bedrooms Proposed: 3 (28 x 80) Lot Size: 741c

Basement with Plumbing: Garage: NOTE Change In Water Supply: Well Public Community have location Distance From Well: 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

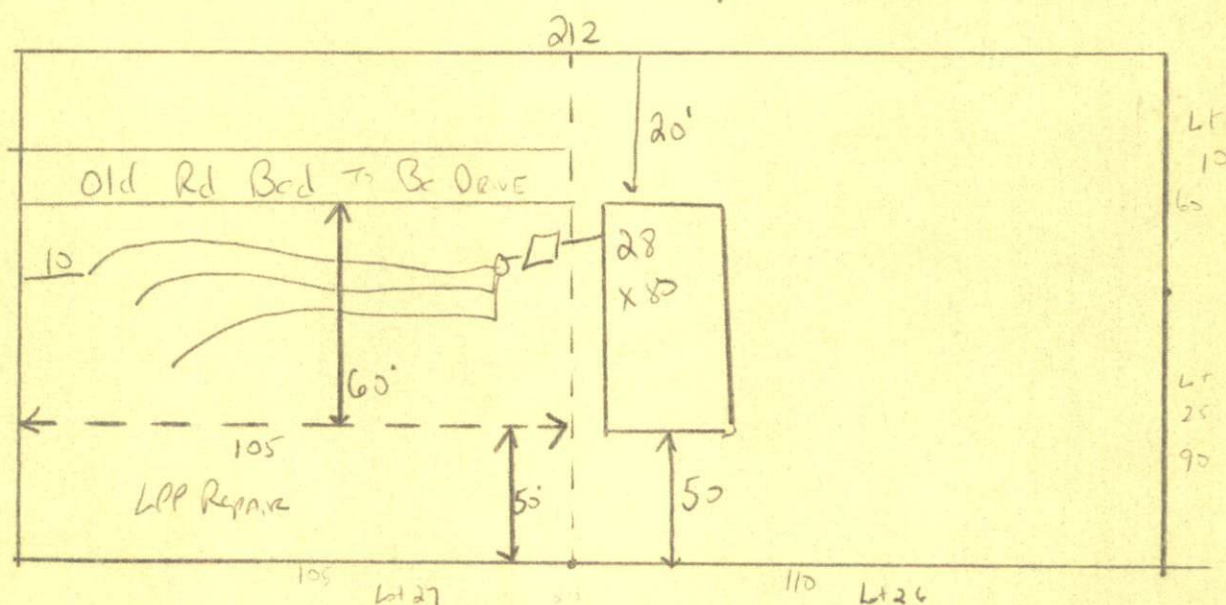
Subsurface Drainage Field No. of ditches 3 exact length 80 width of ditches 3 depth of ditches 18 in.

French Drain Required: Linear feet

Date: 01-05-01

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

Signed: J. L. WARS Environmental Health Specialist



NOTE Change In House location - Home To Be 105 From Front Property Line - MAINTAIN ALL SETBACKS FOLLOW CONTAINERS DO NOT DRIVE OR PARK ON SEPTIC SYSTEM

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 # 17018. 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 Mike Ray

Name: \_\_\_\_\_ Telephone # 499-8382

Address: \_\_\_\_\_

Property Location: SR # 1106 Road Name ?

New Installation  Repair  Septic Tank  Nitrification Lines

Subdivision Longhorn Est Lot # 28

Number of Bedrooms Proposed: 3(28x80) Lot size: 1/4 AC

Basement  With Plumbing  Without Plumbing

Water Supply: Well  Public  Minimum Well Setback: \_\_\_\_\_ 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 80

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: Joe Wilson Date: 01-05-01