

# IMPROVEMENT PERMIT

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) Bennie Stone  
 Property Location: SR# 2017 Adams Rd.

New Installation     Septic Tank  
 Repairs     Nitrification Line

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_  
 Tax ID # 0569-64-5432    Quadrant # 10-0569-0071-03  
 Number of Bedrooms Proposed: Three    Lot Size: \_\_\_\_\_

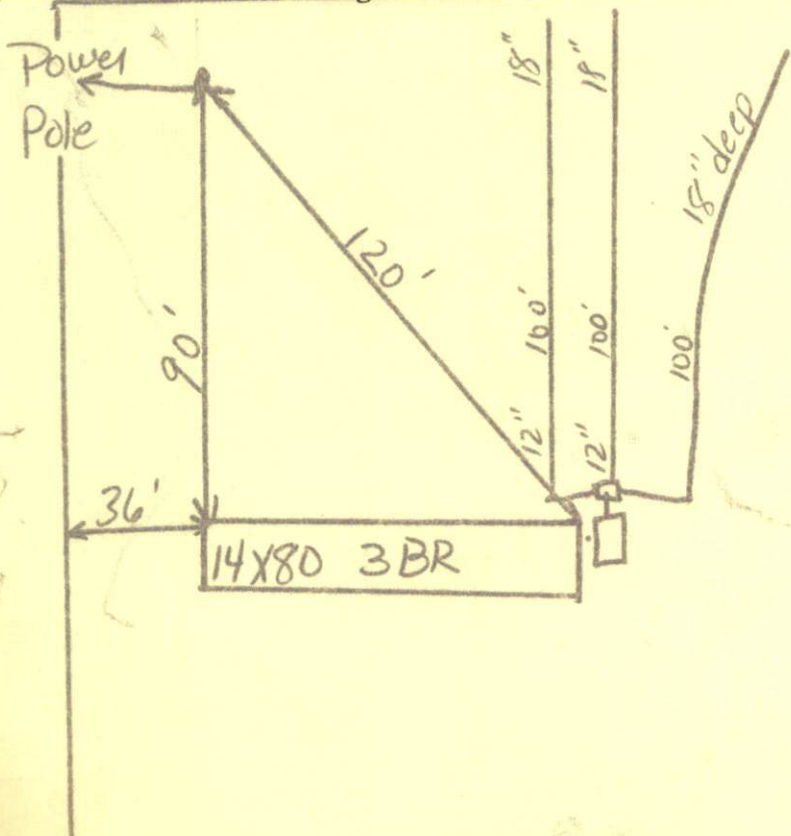
Basement with Plumbing:     Garage:   
 Water Supply:  Well     Public     Community  
 Distance From Well: 50 ft.

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    No. of 3 exact length 100 width of 3 depth of 12-18"  
 Drainage Field    ditches    of each ditch    ft.    ditches    ft.    ditches    in.  
 French Drain Required: \_\_\_\_\_ Linear feet

Date: 23 June 1999  
 Signed: Vernon R. Dodge  
 Environmental Health Specialist

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



- \* Do not drive on system
- \* Maintain setbacks
- \* 6" cover required
- \* Contractor must meet on-site prior to installation
- \* Start trench at 12" deep and end at 18" deep

# AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 15669. 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: Bennie/Elizabeth Stone Telephone # 893-3480

Address: 449 Adams Rd. Lillington NC

Property Location: SR # 2017 Road Name Adams

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

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

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 3 Length of lines 100 feet

Width of ditches 3 ft. Depth of ditches 12-18 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: [Signature] Date: 23 June 1999