

# IMPROVEMENT PERMIT

01-5-2201

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) J.O. Ashworth  New Installation  Septic Tank  
Property Location: SR# 1229  Repairs  Nitrification Line

Subdivision M<sup>c</sup> Farland Lot # 1

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

Number of Bedrooms Proposed: 3 (28x56) Lot Size: .53 ac

Basement with Plumbing:  Garage:  MUST meet onsite Before installing

Water Supply:  Well  Public  Community MUST BEING IN 8 to 12" of approved soil

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

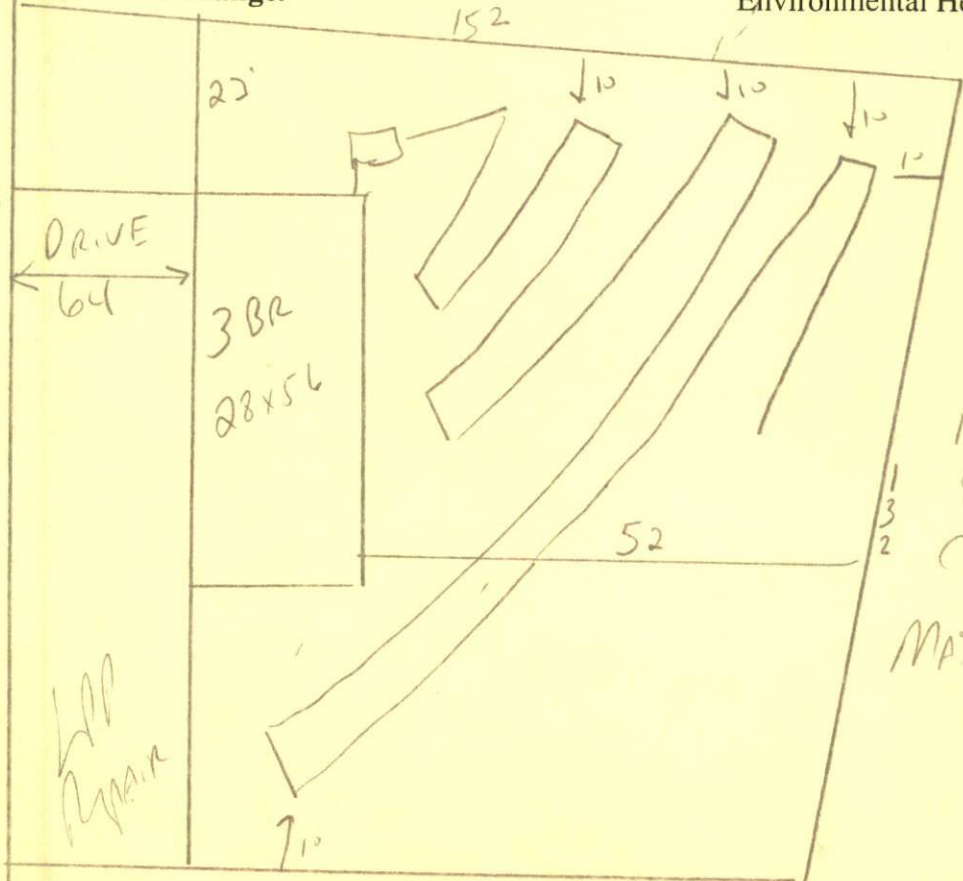
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 400 ft. width of ditches 3 ft. depth of ditches 12 in. max

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

Date: 6-20-01

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

Signed: Joe Waters  
Environmental Health Specialist



STUB out Plumbing  
Shallow 12' max Ditch Depth  
MUST BEING IN 8 to 12" of approved soil.  
Maintain all set Back

SR 1229

LAP REPAIR

149

ARNETT 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 # 18348. 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 JO Ashworth

Name: \_\_\_\_\_ Telephone # 814-2600

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

Property Location: SR # 1229 Road Name \_\_\_\_\_

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

Subdivision McFarland Lot # 1

Number of Bedrooms Proposed: 3(28x56) Lot size: .53 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 1 Length of lines 400

Width of ditches 2 ft. Depth of ditches 12 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: 6-22-01