

IMPROVEMENT PERMIT

01-5-2858

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) Robert Cicci
Property Location: SR# NC24/27
New Installation [checked]
Septic Tank [checked]
Repairs [unchecked]
Nitrification Line [checked]

Subdivision The highlands at Sherwood Forest Lot # 6

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

Number of Bedrooms Proposed: 3 (28x60) Lot Size: .527 ac

Basement with Plumbing: [unchecked] Garage: [unchecked]

Water Supply: [unchecked] Well [checked] Public [checked] Community [unchecked]

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: [checked] Conventional [unchecked] Other \_\_\_\_\_

Size of tank: Septic Tank: 600 gallons Pump Tank: \_\_\_\_\_ gallons

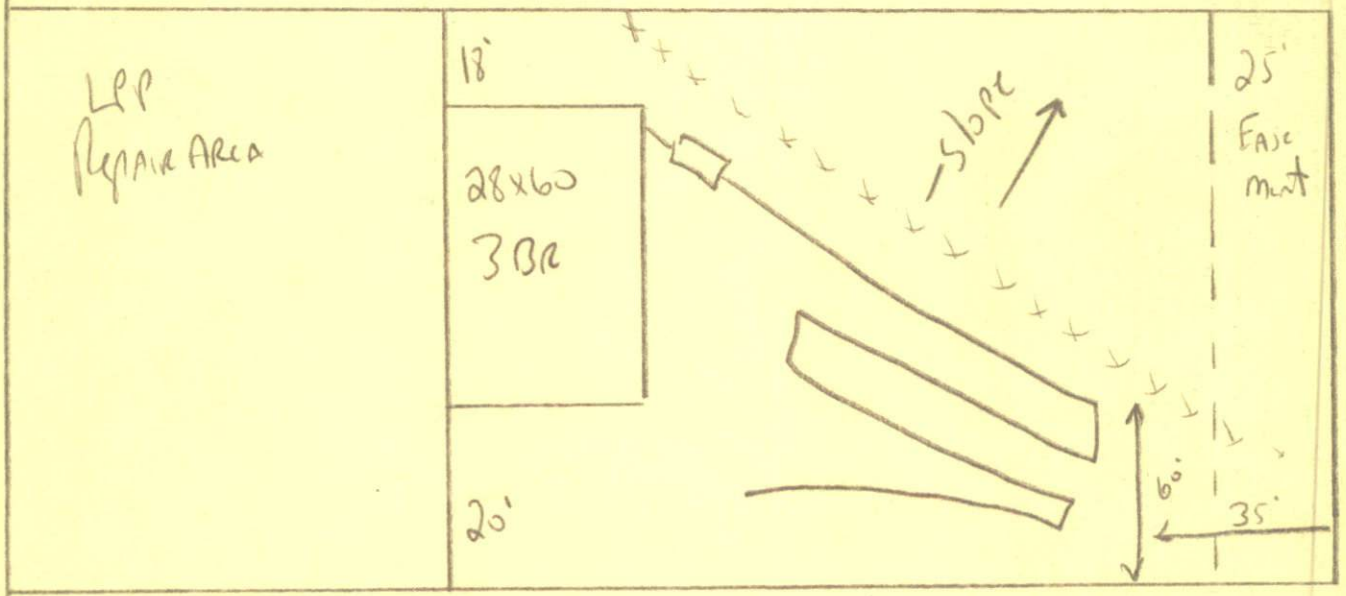
Subsurface Drainage Field No. of ditches 1 exact length 240 ft. width of ditches 3 ft. depth of ditches 18.30 in.

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

Date: 8-29-01

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

Signed: [Signature] Environmental Health Specialist



STUB out Plumbing shallow 18 to 30" Ditch Depth
MAINTAIN All Set Backs Keep Lines 35' From Property Line with Easement on it. 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 # 18510. 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 Robert Cicci

Name: \_\_\_\_\_ Telephone # 499 2424

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

Property Location: SR # NC 24/27 Road Name \_\_\_\_\_

New Installation  Repair  Septic Tank  Nitrification Lines

Subdivision The Highlands At Sherwood Forest Lot # 6

Number of Bedrooms Proposed: 3 (28x60) Lot size: .527

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 240

Width of ditches 3 ft. Depth of ditches 18-30 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 W. [Signature] Date: 8-29-01