

IMPROVEMENT PERMIT

01-5-3520

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) Sandra Lee Reed / Quail Run Homes New Installation Septic Tank
Property Location: SR# 1201 Ponderosa Rd Repairs Nitrification Line

Subdivision VISTA Ridge Lot # A

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (52x28) Lot Size: .91 AC

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

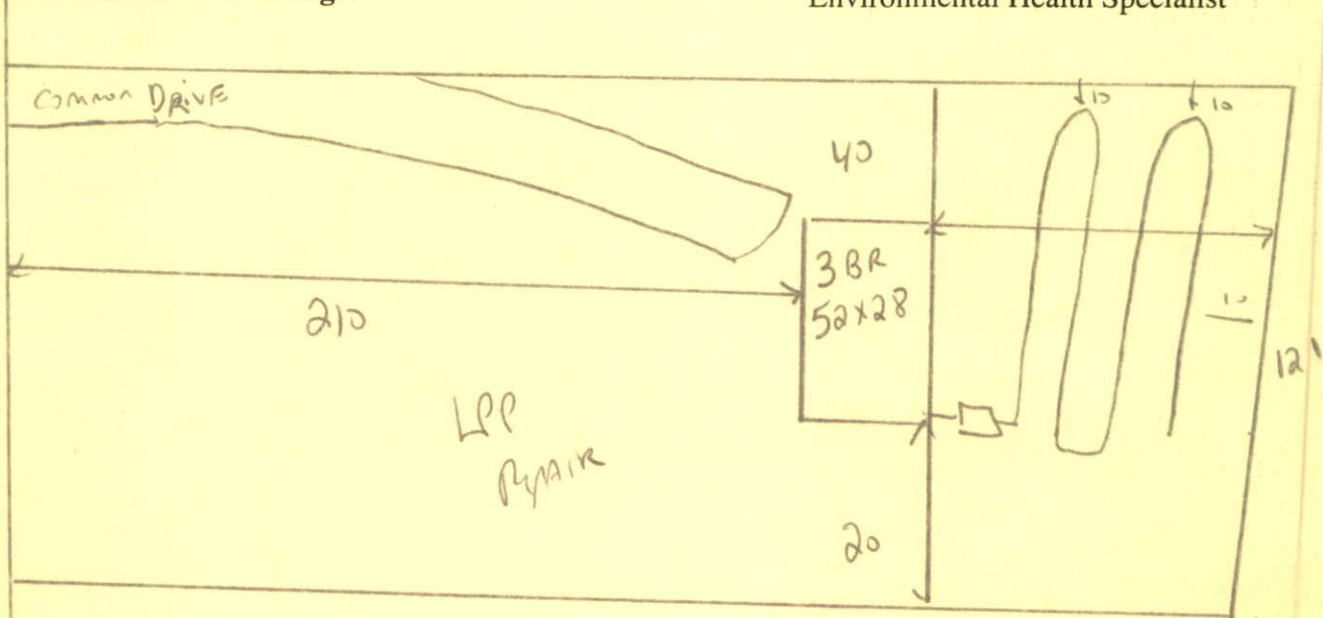
Subsurface No. of 1 exact length 240 width of 3 depth of 18-24
Drainage Field ditches _____ of each ditch _____ ft. ditches _____ ft. ditches _____ in.

French Drain Required: _____ Linear feet

Date: 12-03-01

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

Signed: J. W. [Signature]
Environmental Health Specialist



SR 1201

STUB out Plumbing shallow 18-24" Ditch Depth
Maintain ALL soil BACK
Do not DRIVE on PUMP or 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 # 18853. 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.*

Sandra Reed / Quail Run Home 258-5512
Name Telephone #

Address

1221
Property Location SR# Road Name

VISTA Ridge A 3 (52x28) 0.91 Ac
Subdivision Lot # # Bedrooms Proposed Lot size

TYPE OF SYSTEM

New Installation [] Repair Septic Tank [] Nitrification Lines
 Conventional Other _____ [] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well Public - Minimum Well Setback: 50 Ft.

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 240 Ft.

Width of ditches 3 ft. Depth of ditches 18.24 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.

[Signature] 12-03-01
Signature of Authorized Agent for Harnett County Date