

IMPROVEMENT PERMIT 02-5-3988

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) Brenda Holder
Property Location: SR# 1273 Holly Springs Ch
New Installation, Septic Tank, Repairs, Nitrification Line

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

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

Number of Bedrooms Proposed: 3 (28x56) Lot Size: 27.0 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: [X] Conventional [ ] Other \_\_\_\_\_

Size of tank: Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

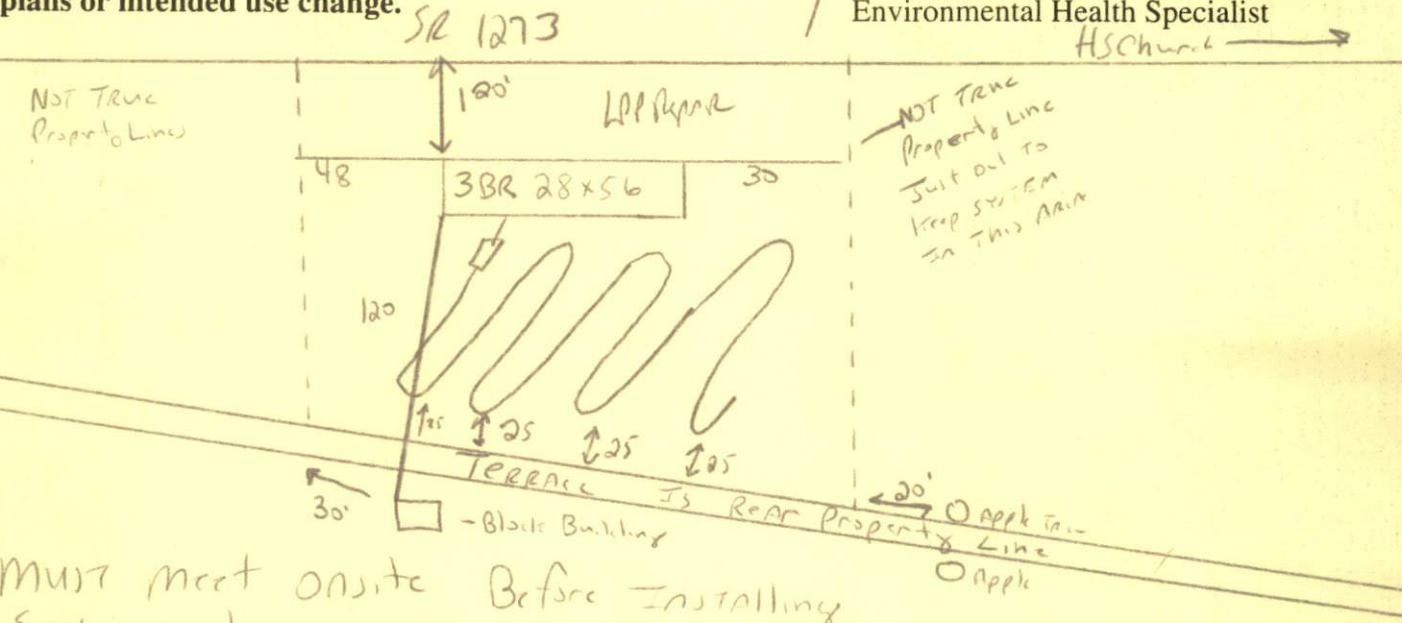
Subsurface Drainage Field No. of ditches 1 exact length 400 ft. width of ditches 3 ft. depth of ditches 18 MAX in.

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

Date: 02-20-02

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

Signed: J. W. Schuch Environmental Health Specialist



MUST meet onsite Before installing Septic system
Maintain All set Backs - Follow contours
Keep Drain Lines 25' from Bottom edge of Terrace
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 # 18719. 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.

Name Brenda Holder Telephone # 919-775-4942

Address \_\_\_\_\_

1273  
Property Location SR# \_\_\_\_\_ Road Name \_\_\_\_\_

Subdivision \_\_\_\_\_ Lot # 3 (28x56) # Bedrooms Proposed 27.0 Ac 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 400 Ft.

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.

Signature of Authorized Agent for Harnett County [Signature] Date 02-22-02