

IMPROVEMENT PERMIT

02-5-4044

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) Geoffrey Bethany New Installation Septic Tank
Property Location: SR# Near Repairs Nitrification Line

Subdivision Deer cove Lot # 3

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (28x48) Lot Size: 2.51 Ac

Basement with Plumbing: Garage: must meet onsite before

Water Supply: Well Public Community installing - may not need

Distance From Well: 50 ft. pump-

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other Pump to Conventional

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

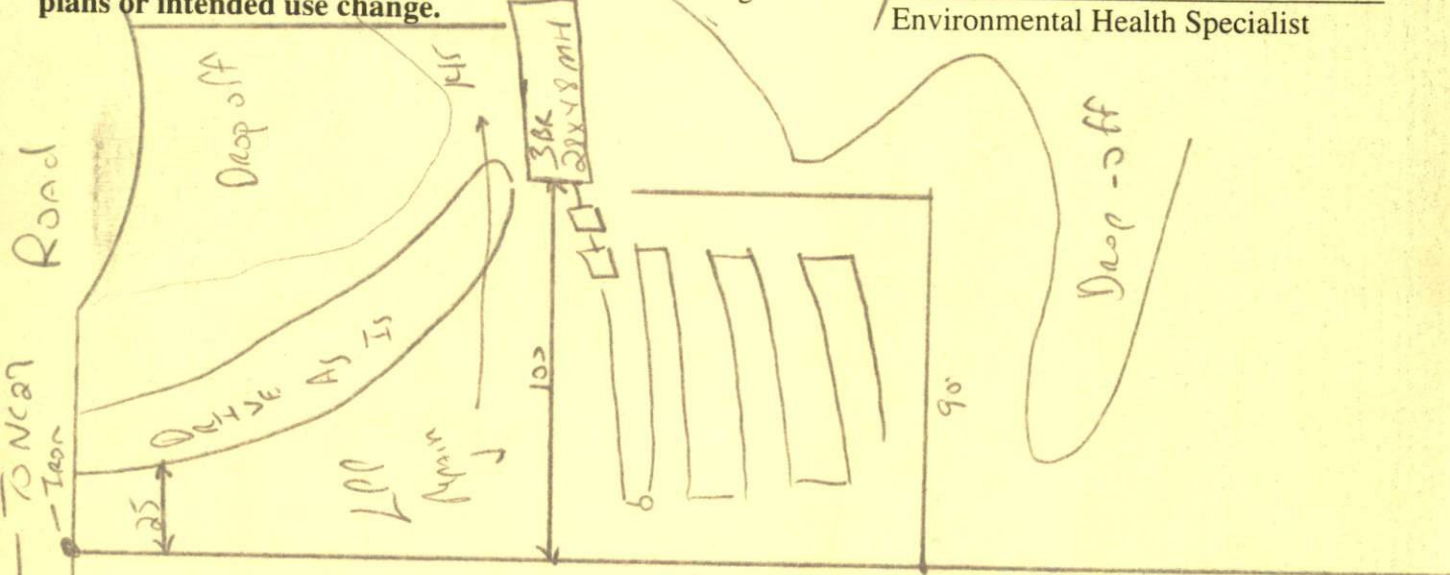
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 500 ft. width of ditches 3 ft. depth of ditches 18 MAX in.

French Drain Required: _____ Linear feet

Date: 2-26-02

Signed: Joe Wilks
Environmental Health Specialist

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



Meet onsite before installing septic system - I think a pump may not be required (depending on final house placement and plumbing stub out) stub out plumbing shallow where shown - maintain all setbacks 18" ditch depths - 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 # 18724. 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 Geoffrey S. Bohay Telephone # 919-708-7967

Address _____

Property Location SR# NC27 Road Name _____

Subdivision DeerCrest Lot # 3 # Bedrooms Proposed 3(28x48) Lot size 2.51 Ac

TYPE OF SYSTEM

New Installation [] Repair [] Septic Tank [] Nitrification Lines

Conventional Other Pump to Conventional

[] 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 50 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 2-26-02