

#02-5-4674

HARNETT COUNTY HEALTH DEPARTMENT

No 19193

IMPROVEMENT PERMIT

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."

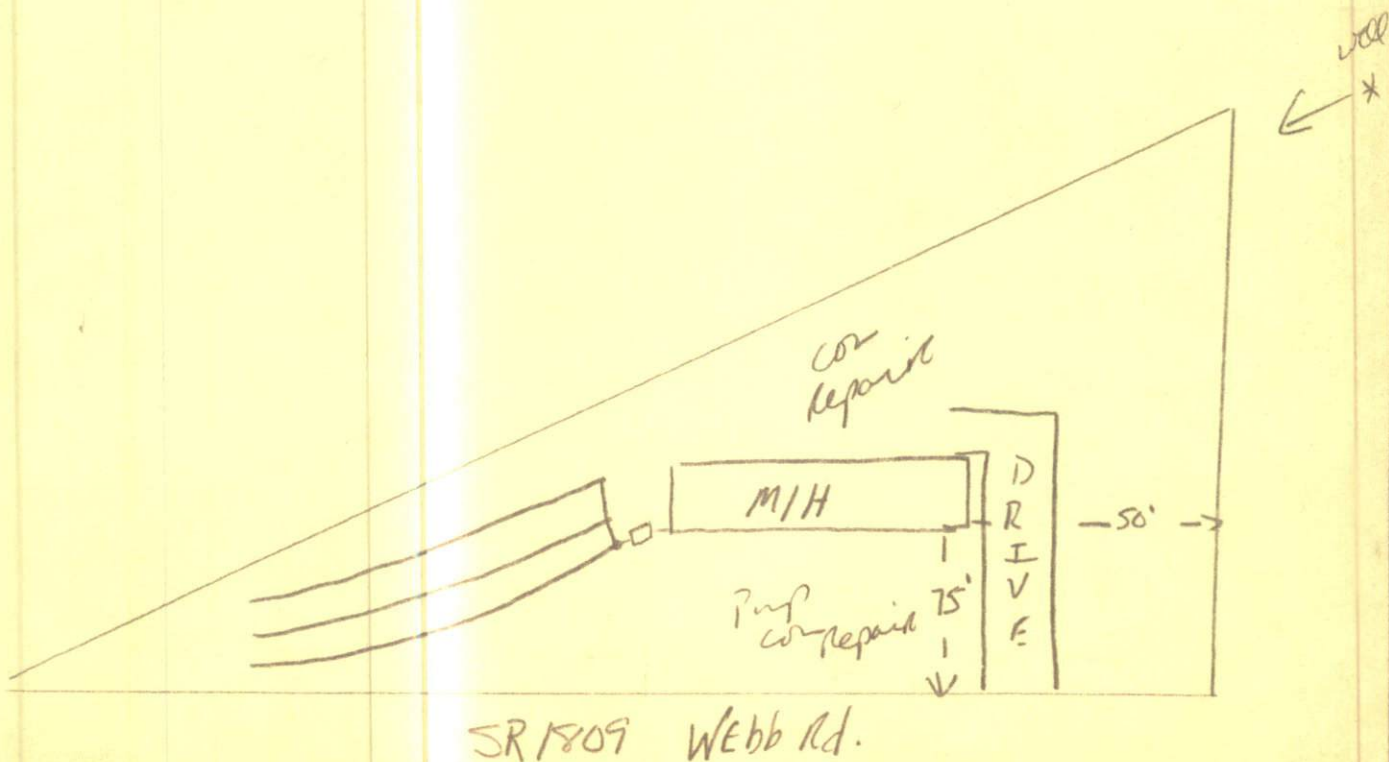
Name: (owner) John Fisher☒ New Installation ☒ Septic TankProperty Location: SR# 1809 Webb☐ Repairs ☒ Nitrification LineSubdivision Lola McLean Lot # —Tax ID # — Quadrant # —Number of Bedrooms Proposed: 3 Lot Size: 1.25 acreBasement with Plumbing: ☐ Garage: ☐Water Supply: ☐ Well ☒ Public ☐ CommunityDistance 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: — gallonsSubsurface Drainage Field No. of ditches 3 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18-22 in.French Drain Required: — Linear feetDate: 5-31-02

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

Signed: James E. Markham, P.E.
Environmental Health Specialist



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 # 19193. 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 John Fisher Telephone# 910-892-3165
Address 15 Cocateel Ln
Property Location SR# 1809 Road Name Webb
Subdivision Lola McLane Lot # 3 # Bedrooms Proposed 1.25 Lot Size

TYPE OF SYSTEM

☒ New Installation ☐ Repair ☒ Septic Tank ☒ Nitrification Lines

☒ Conventional ☐ Other _____

☐ Basement ☐ With Plumbing ☒ Without Plumbing

Water Supply: ☒ Well ☒ Public Water Supply Minimum Well Setback: 50' Ft.

Septic Tank 1000 Pump Chamber _____

NITIRFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 3 Length of lines 100 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.

James E. Marshall
Signature of Authorized Agent for Harnett County of Harnett

5-31-02

Date