

IMPROVEMENT PERMIT

No 19752
03-5-5158

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) DAMIAN Tapia New Installation Septic Tank
Property Location: SR# 1281 Repairs Nitrification Line
Next Door To 154 BlueTICK Road
Subdivision NAH II Lot # 21 site A

Tax ID # _____ Quadrant # _____
Number of Bedrooms Proposed: 4 (28 x 80) Lot Size: 2.42 AC
Basement with Plumbing: Garage: Please note This permit voids
Water Supply: Well Public Community Permit # 16490 Issued on
Distance From Well: 50 ft. 12-9-99

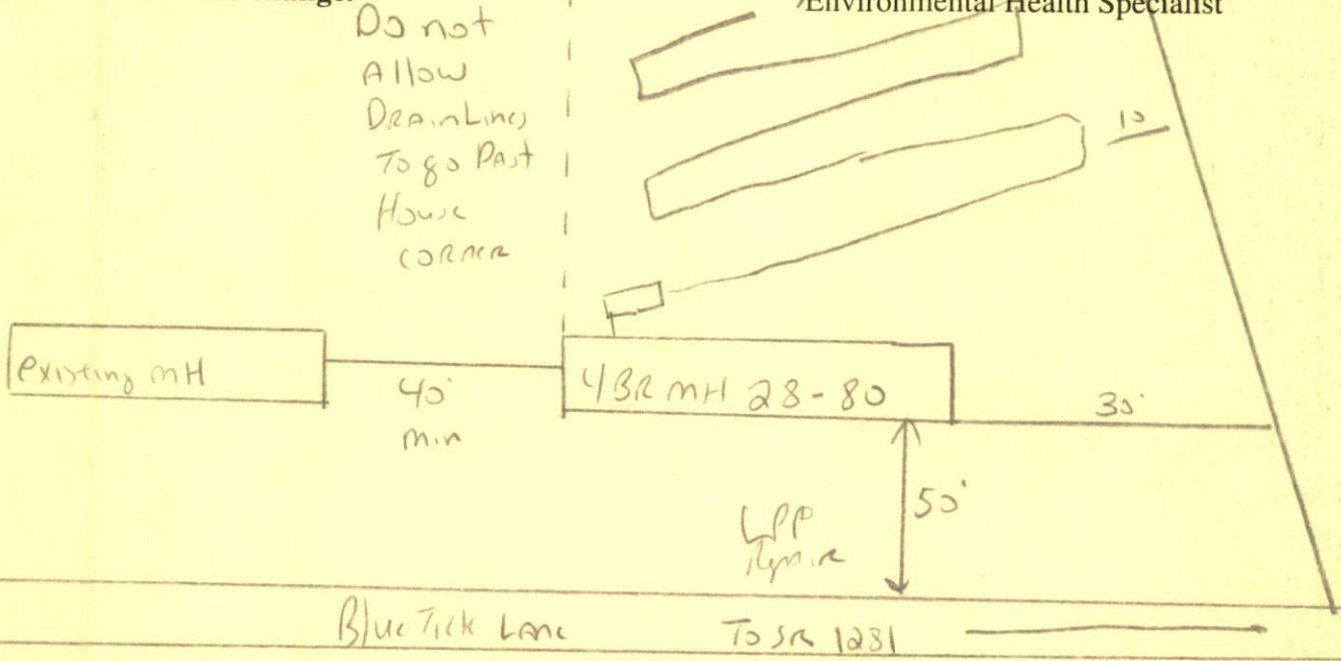
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other _____
Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons MAX
Subsurface No. of exact length width of depth of
Drainage Field ditches 1 of each ditch 400 ft. ditches 3 ft. ditches 18 in.
French Drain Required: _____ Linear feet

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

Date: 9-25-02
Signed: [Signature]
Environmental Health Specialist

Do not Allow Drain Lines To go Past House corner



Stub Out Plumbing shallow 18" MAX ditch Depth
Follow contours maintain All setbacks 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 # 19752. 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 Damian Tapia Telephone # 774-8800

Address _____

1281

Property Location SR# _____ Road Name _____

NAH II 2/ site A 4 (28x80) 2.42Ac

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: _____ Ft.
Septic Tank 1000 Pump Chamber _____

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 in 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 Joe Whelan Date 9-25-02