

HARNETT COUNTY HEALTH DEPARTMENT

No 13044

IMPROVEMENT PERMIT

03-5-5316

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) K. Arnold Corp Sweeten Judith
Property Location: SR# Hwy 24
New Installation, Septic Tank, Repairs, Nitrification Line

Subdivision Heritage Village Lot # G-24

Tax ID # Quadrant #

Number of Bedrooms Proposed: 3 (28x66) Lot Size: 18,531 sq ft

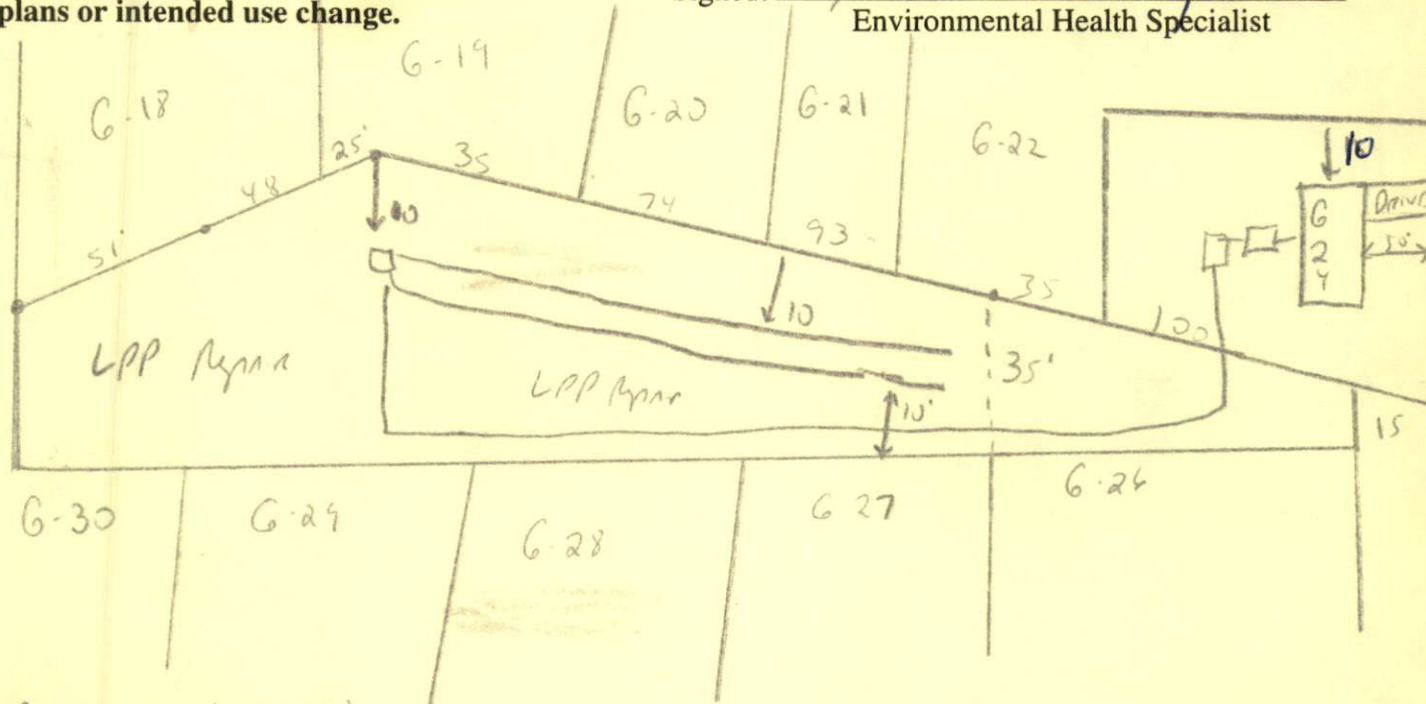
Basement with Plumbing: Garage:
Water Supply: Well, Public, Community
Distance From Well: ft.

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

Type of system: Conventional, Other Pump to Conv.
Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons
Subsurface Drainage Field: No. of ditches 2, exact length of each ditch 120 ft, width of ditches 3 ft, depth of ditches 18 in.
French Drain Required: Linear feet

Date: 11-24-97 8-20-02
Signed: [Signature] Environmental Health Specialist

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



MUST meet onsite
18" Ditch Depth
Follow contour
Label supply line

HARNETT COUNTY HEALTH DEPARTMENT
AUTORIZATION TO CONSTRUCT

15044 0-3-5-5314

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # ~~12532~~. 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.

Owner or Authorized Agent K. Arnold Corp

Name: _____ Telephone # _____

Address: _____

Property Location: SR# HWY 24 Road Name _____

New Installation Repair _____ Septic Tank Nitrification Lines

Subdivision Heritage Village Lot # G 24

Number of Bedrooms Proposed: 3 Lot size: ~~18,000 sq ft~~ .43 ac

Basement _____ With Plumbing _____ Without Plumbing _____

Water Supply: Well _____ Public Minimum Well Setback: _____ ft.

Type of System: Conventional _____ Other

Tank Volume: Septic Tank 1000 gallons Pump Chamber 1000 gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 2 Length of lines 120 ~~200~~

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.

Authorized Agent for Harnett County Health Department

Name: [Signature] Date: 8-13-97

(Revised 2/96)CNSTRCT.WPD [Signature] 8-20-02