

IMPROVEMENT PERMIT

03-5-5765

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) LORRAINE CURRIE

New Installation  Septic Tank

Property Location: SR# 1215

Repairs  Nitrification Line

Subdivision Jmkelly Acres Lot # 3

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

Number of Bedrooms Proposed: 4 (28x80) Lot Size: 1.20 AC

Basement with Plumbing:  Garage:  PLEASE NOTE THAT THIS IS THE ONLY WAY I COULD GET A HOUSE

Water Supply:  Well  Public  Community THIS LARGE 4 BEDROOM 28x80 ON THIS

Distance From Well: 50 ft. lot

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

Type of system:  Conventional  Other Pumps Conventional

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

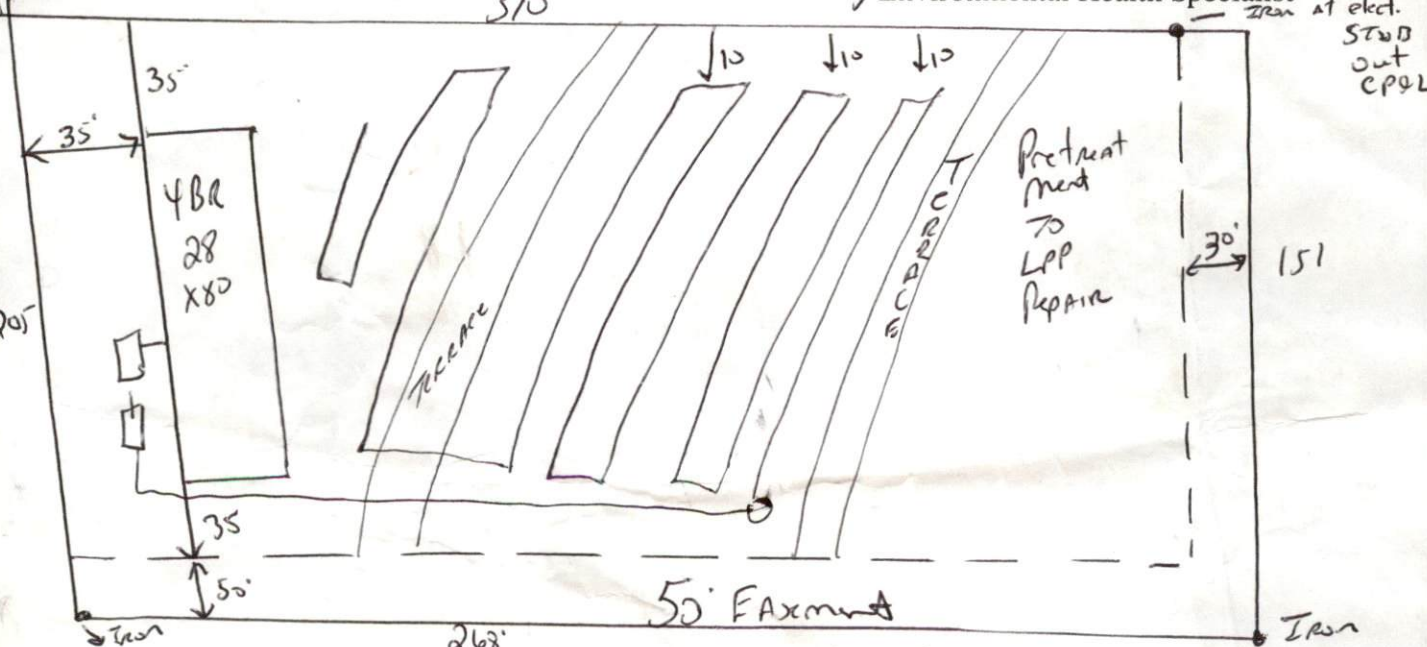
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 640 ft. width of ditches 3 ft. depth of ditches 18 MAX in.

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

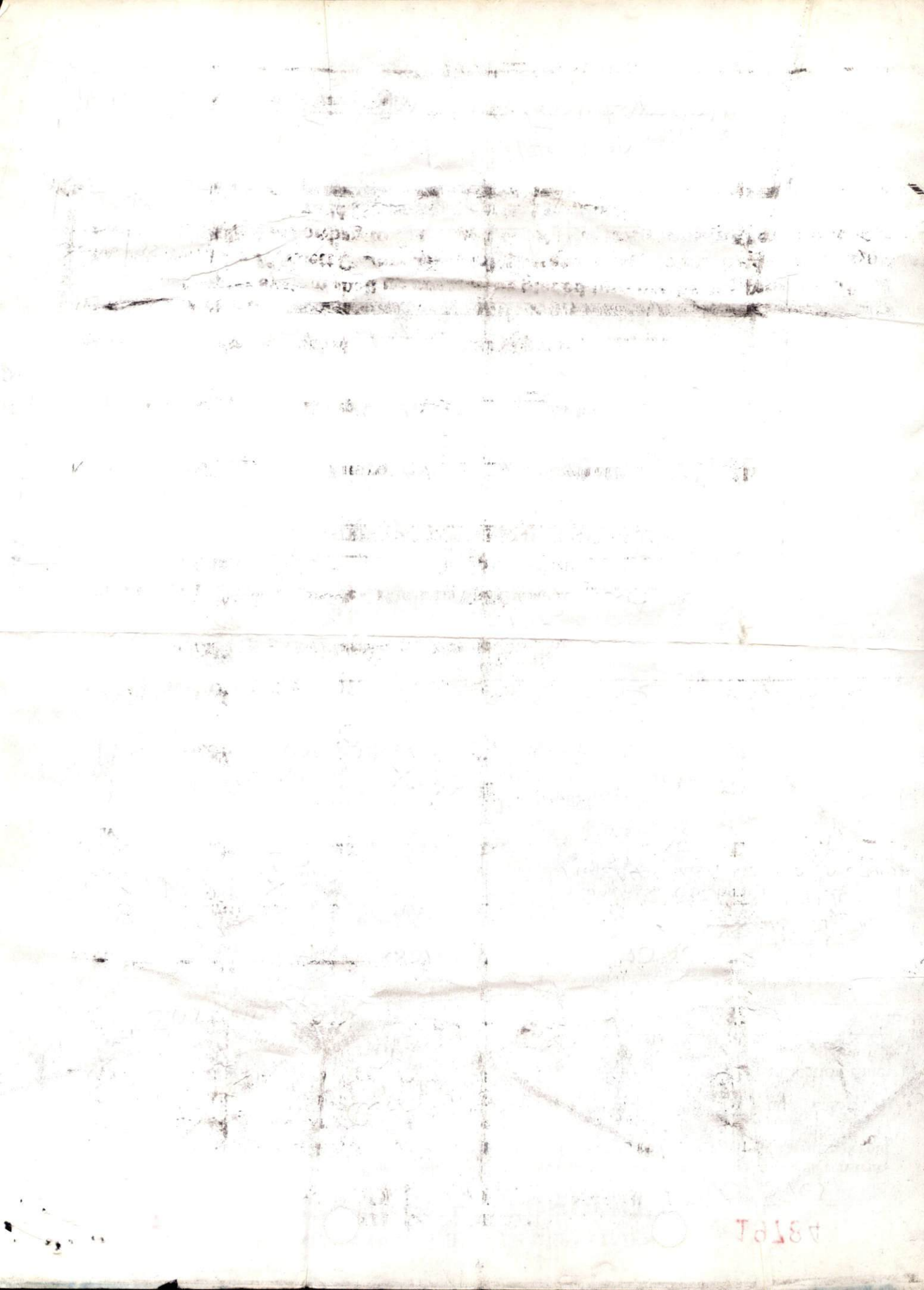
Date: 10-30-02

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

Signed: Joe Lind Environmental Health Specialist



PLEASE NOTE CHANGES IN HOUSE LOCATION MEET ON SITE FOR FINAL LAYOUT, FINAL LAYOUT MAY CHANGE DO NOT DRIVE OR PARK ON SEPTIC SYSTEM



1879

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 # 19784. 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.

LORRAINE CURRIE 910-893-2838  
Name Telephone #

Address

1215  
Property Location SR# Road Name

JM Kelly Acres 3 4 (28x80) 1.25 AC  
Subdivision Lot # # Bedrooms Proposed Lot size

**TYPE OF SYSTEM**

New Installation  Repair  Septic Tank  Nitrification Lines

Conventional Other Pump to Conv.

Basement  With Plumbing  Without Plumbing

Water Supply:  Well  Public - Minimum Well Setback: \_\_\_\_\_ Ft.  
Septic Tank 1000 Pump Chamber 1000

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 1 Length of lines 640 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] 10-30-02  
Signature of Authorized Agent for Harnett County Date

JOE

578  
2

578-2512