

IMPROVEMENT PERMIT

03-5-7992

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) Sonja Melamb Helder  New Installation  Septic Tank

Property Location: SR# 2042  Repairs  Nitrification Line

Raynor Melamb.

Subdivision NA Lot # —

Tax ID # — Quadrant # —

Number of Bedrooms Proposed: 3 Lot Size: 2.10 acres

Basement with Plumbing:  Garage:

Water Supply:  Well  Public  Community

Distance 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 splitting

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

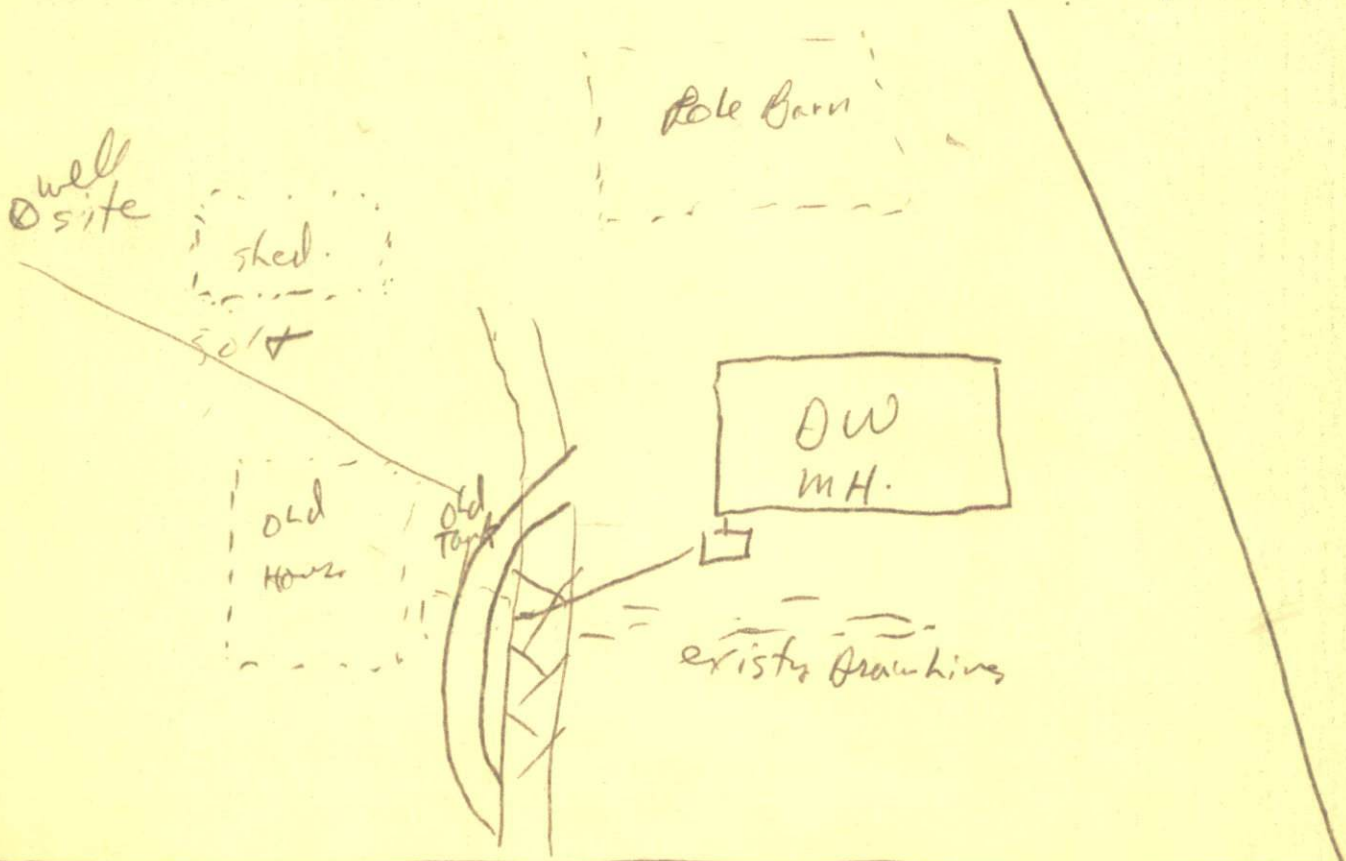
Subsurface Drainage Field No. of — exact length — width of — depth of — in. ditches — of each ditch — ft. ditches — ft. ditches — in.

French Drain Required: — Linear feet

Date: 10/16/03

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

Signed: [Signature] Environmental Health Specialist



SR 2042 Raynor Melamb.

HARNETT COUNTY HEALTH DEPARTMENT  
AUTORIZATION TO CONSTRU

03-5-7992

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 19620. 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 Sonye McComb Holder Telephone# 814-2027

Address 1432 Walker Rd.

Property Location SR# 2042 Road Name Raynor McComb.

Subdivision — Lot # — # Bedrooms Proposed 3 Lot Size 2.10 ac

TYPE OF SYSTEM

- New Installation  Repair  Septic Tank  Nitrification Lines
- Conventional  Other Tank Only.
- Basement  With Plumbing  Without Plumbing

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

Septic Tank 1000 gal Pump Chamber NA gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 1 Ft.

Width of ditches 1 ft. Depth of ditches 1 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 of Harnett [Signature] Date 10/16/03

Written 10/28/03 + Scanned