

HTE 04-5-10639

IMPROVEMENT PERMIT

21276

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) Joseph L. Odem New Installation Septic Tank
Property Location: SR# 2027 Horseshoe Bend Rd. Repairs Nitrification Line

Subdivision Horseshoe Estates Lot # 8

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: .694c

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50 min 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: _____ gallons

Subsurface Drainage Field No. of ditches 2 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 18-24 in.

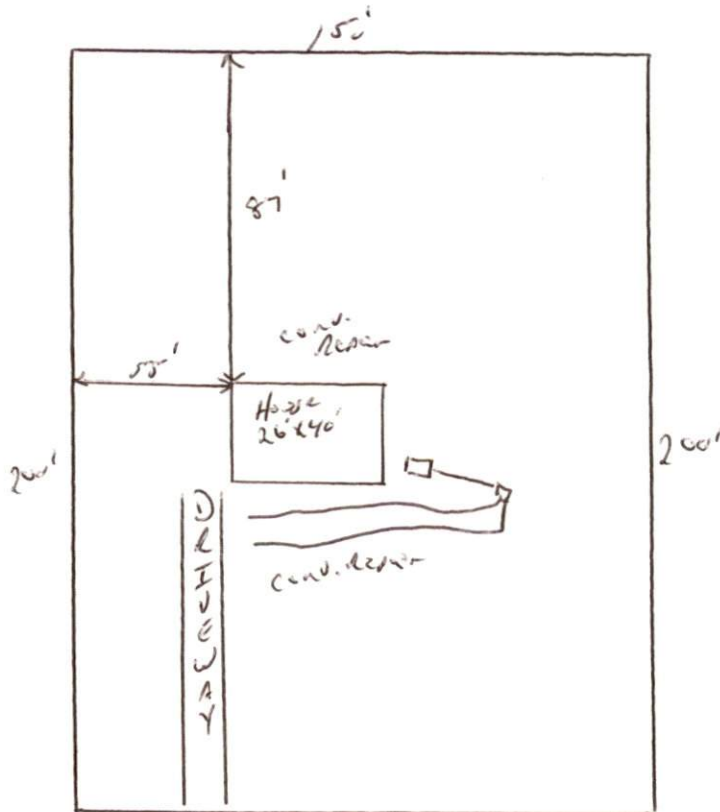
French Drain Required: _____ Linear feet

Date: 11/16/2014

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

Signed: Bryan McSwain R.S.
Environmental Health Specialist

* Mention all setbacks
* Show ditches on contour



SR 2027

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH
AUTORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 21276. 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 Joseph L. Odem Telephone # 658 3776 3763

Address 121 College St. Bannockburn, N.C. 28323

Property Location SR# 2027 Road Name Horseshoe Bend

Subdivision Horseshoe Estates Lot # 8 # Bedrooms Proposed 3 Lot Size .68Ac

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 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 2 Length of lines 75 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.

Ray McLean R.S.
Signature of Authorized Agent for Harnett County

11/16/2004
Date