

HTE# 06-5004252

# IMPROVEMENT PERMIT 22833

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) LINWOOD & DEJEANETA BLOUNT New Installation  Septic Tank  Repair   
 Property Location: SR# 2033 SANDERFER RD Nitrification Line  Expansion   
 Subdivision RA McLAMB Lot # 1  
 Tax ID# \_\_\_\_\_ Quadrant # \_\_\_\_\_  
 Number of Bedrooms Proposed: 3 (360 gpd) Lot Size: 4.28 AC

Basement with Plumbing:  Garage:   
 Water Supply:  Well  Public  Community  
 Distance From Well: 100 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 25% REDUCTION SYSTEM

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

Subsurface Drainage Field No. of ditches 3 ft. exact length of each ditch 50 ft. width of ditches 3 ft. depth of ditches 18-36 in.

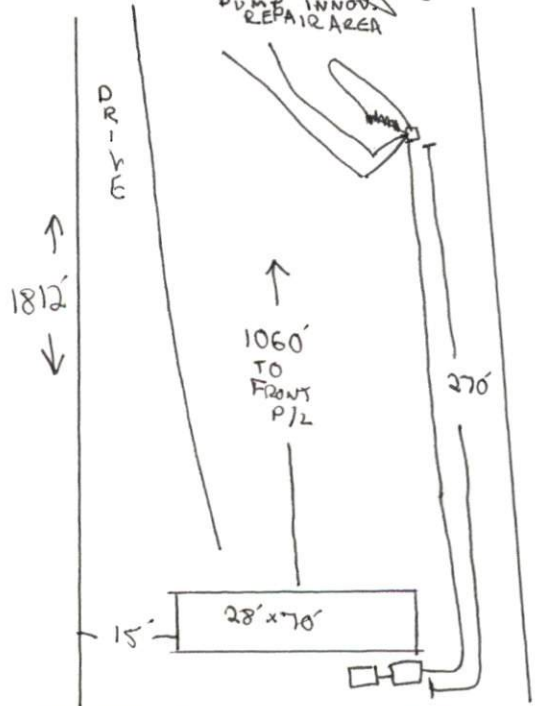
French Drain Required: \_\_\_\_\_ Linear feet

Date: 3/28/06  
**PERMIT EXPIRES 5 YEARS FROM ABOVE DATE**

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

Signed: [Signature] Environmental Health Specialist

\*MAINTAIN ALL SETBACKS  
 \*CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION



# HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 22833. 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.*

LINWOOD & DEJENNETA BLOUNT 919-639-2288  
 Name Telephone #

115 KNOLLWOOD CT. Apt. B ANGIER NC 27501  
 Address

2033 SANDERFER RD  
 Property Location SR# Road Name

RA McLamb 1 3 (360 sqd) 4.28 AC  
 Subdivision Lot # # Bedrooms Proposed Lot Size

### TYPE OF SYSTEM

New Installation  Repair  Septic Tank  Nitrification Lines  
 Conventional  Other PUMP TO 25% REDUCTION SYSTEM  
 Basement  With Plumbing  Without Plumbing

Water Supply:  Well  Public Water Supply Minimum Well Setback: 100 Ft.  
 Septic Tank 1000 gal Pump Chamber 1000 gal

### NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 3 Length of lines 50 Ft.  
 Width of ditches 3 ft. Depth of ditches 18-36 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] 3/28/06  
 Signature of Authorized Agent for Harnett County Date