

IMPROVEMENT PERMIT

01-5-12351

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) Pine Grove, Dev.
Property Location: SR# 1114
New Installation
Septic Tank
Repairs
Nitrification Line

Subdivision Farm @ 5 Ponds Lot # 61

Tax ID # Quadrant #

Number of Bedrooms Proposed: 3 (27x56) Lot Size: .87

Basement with Plumbing: Garage: With Easement To Lot 52

Water Supply: Well Public Community For Septic System - This house

Distance From Well: 50 ft. Should be connected to sewer when available per

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

Type of system: Conventional Other Pump to conventional

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

Subsurface Drainage Field No. of ditches 1 exact length 400 ft. width of ditches 3 ft. depth of ditches 18 in.

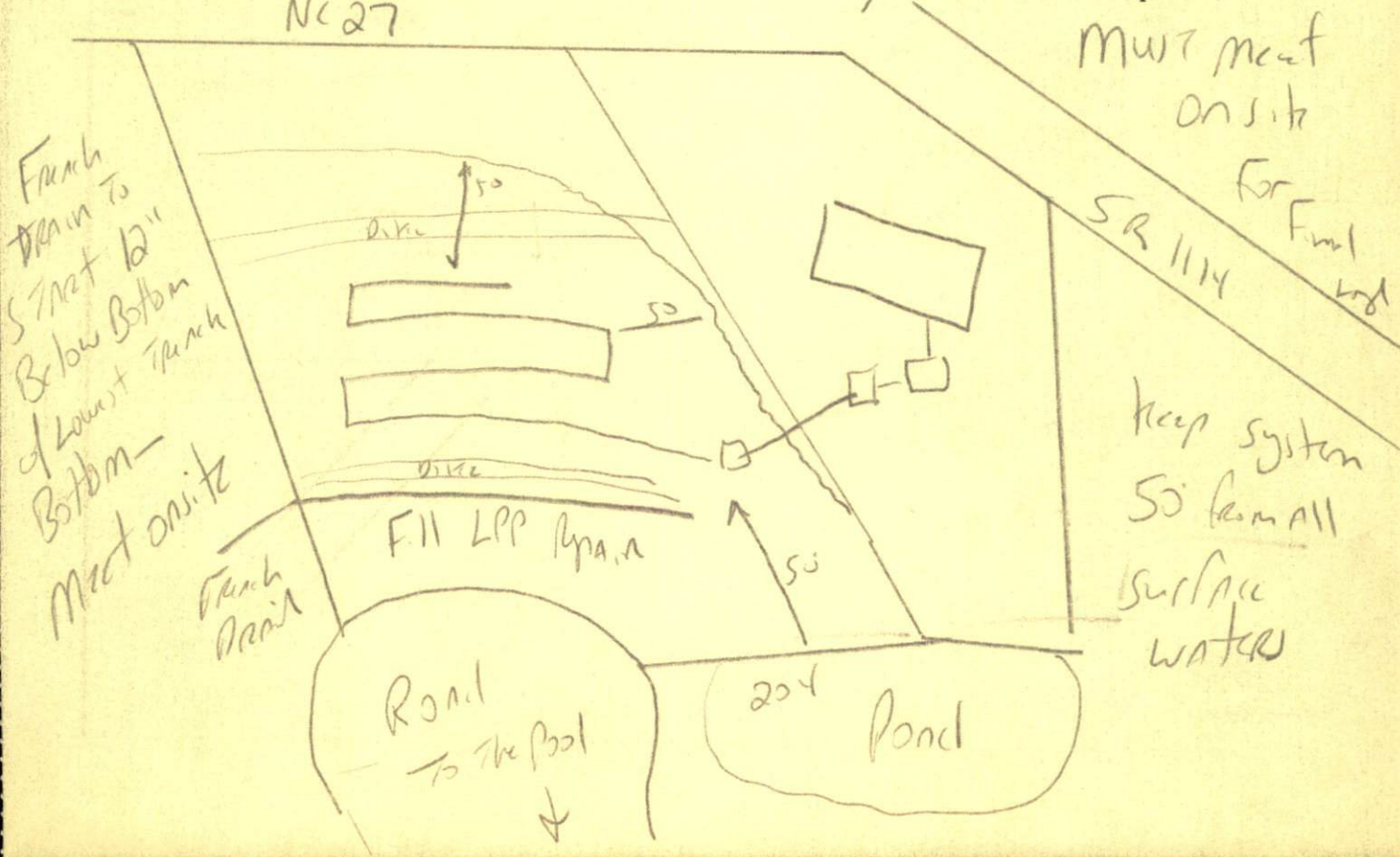
French Drain Required: 150 Linear feet

Date: 02-28-01

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

Signed: Joe Weber Environmental Health Specialist

NC 27



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 # 17641. 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 Pine Grove

Name: _____ Telephone # 498-2204

Address: _____

Property Location: SR # 1114 Road Name _____

New Installation Repair _____ Septic Tank Nitrification Lines

Subdivision FARM @ 5 Ponds Lot # 61 plus area on 52

Number of Bedrooms Proposed: 3 (27x56) Lot size: .85 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 1 Length of lines 400

Width of ditches 3 ft. Depth of ditches 18 MAX inches

French Drain: Linear feet required APPX 150 Depth of gravel 36" /

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: 02-28-01