

HTE# 01-5-348622

IMPROVEMENT PERMIT 22300

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) Barkley Arnold New Installation Septic Tank Repair

Property Location: SR# Spring Lane Rd off Hwy 42 Nitrification Line Expansion

Subdivision _____ Lot # 8

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (360 gal) Lot Size: 17,180 ft²

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 Pump to Conventional

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

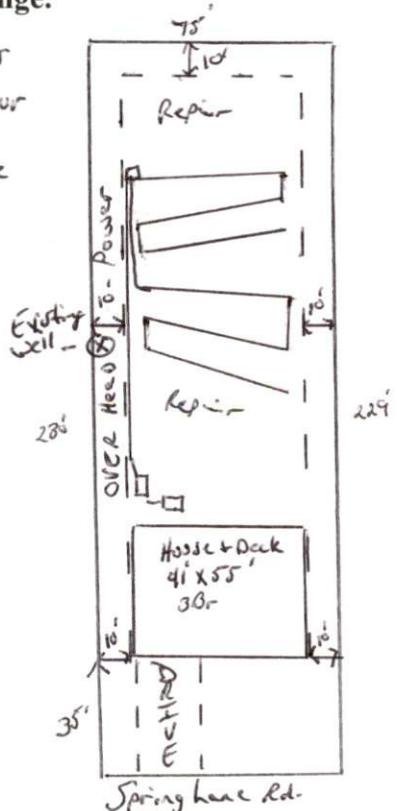
Subsurface Drainage Field No. of ditches 2 ft. exact length of each ditch 150 ft. width of ditches 3 ft. depth of ditches 18-20 in.

French Drain Required: _____ Linear feet

Date: 2/2/2006
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

- * Maintain all setbacks
- * Run ditches on contour
- * Existing well to be filled in prior to installing system
- * Due to age of lot repair is not required



Signed: Ray McSwain, R.S.
 Environmental Health Specialist

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 # 22300. 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.*

Barkley Arnold 9198683354
Name Telephone #

122 Phikerson Dr. Fuquay Varina, N.C.
Address

1498 Spring Lane
Property Location SR# Road Name

Subdivision Ø Lot # 3 (360 gal) # Bedrooms Proposed 17,150 ft² Lot Size

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other Pump to Conventional

Basement With Plumbing Without Plumbing

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

Septic Tank 1000 gal Pump Chamber 1000 gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 2 Length of lines 150 Ft.

Width of ditches 3 ft. Depth of ditches 18-20 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]
Signature of Authorized Agent for Harnett County

2/2/2006
Date