

IMPROVEMENT PERMIT

OB-5-7200R

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) Terri Cree
Property Location: SR# NC 24/27
New Installation, Septic Tank, Repairs, Nitrification Line

Subdivision The Highlands @ Sherwood Forest Lot # 40

Tax ID # Quadrant #

Number of Bedrooms Proposed: 3 (42x72) Modular Lot Size: .51 ac

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.

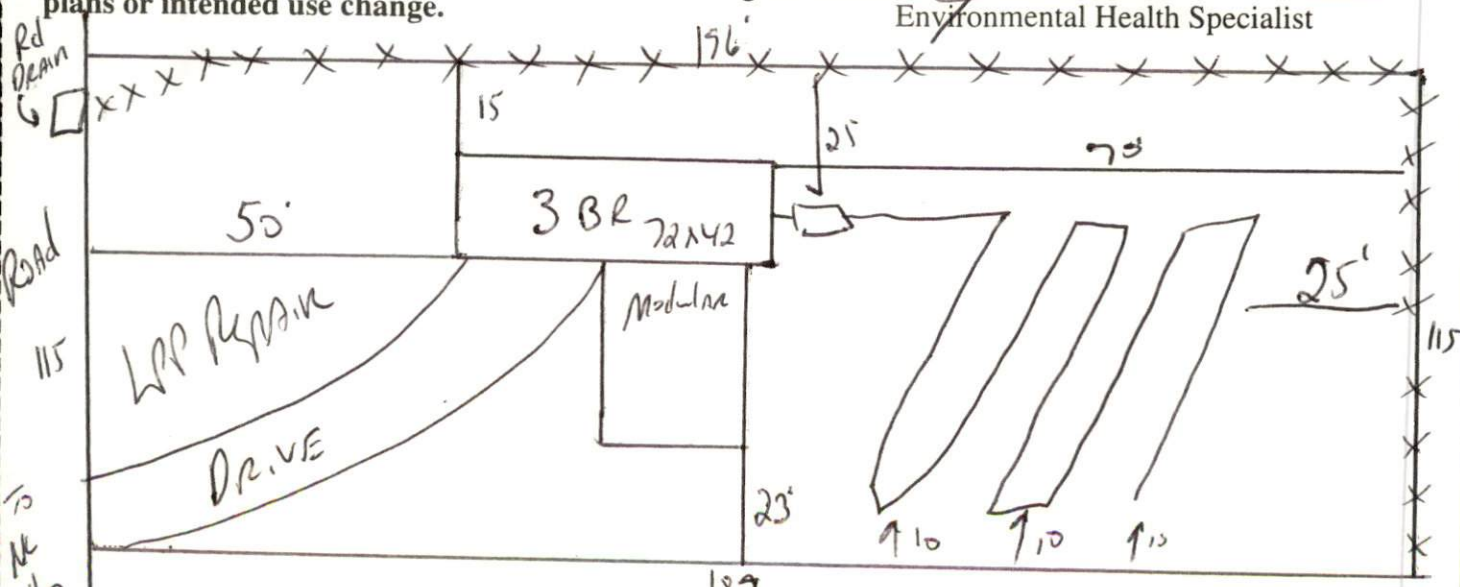
Type of system: Conventional, Other

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

Subsurface Drainage Field No. of ditches 1 exact length 240 width of ditches 3 depth of ditches 18 MAX

French Drain Required: 350 APPX Linear feet
French Drain To Be At Least 36" deep with 30" gravel
Date: 7-30-03

This permit is subject to revocation if site plans or intended use change.
Signed: J. W. [Signature] Environmental Health Specialist



Meet onsite Before Installing MAINTAIN ALL set BACKS
MAINTAIN ALL set BACKS
Do not DRIVE on pack ON septic system

HARNETT COUNTY HEALTH DEPARTMENT
AUTORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 20185. 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.

TERRI CIECI 499-2424
Name Telephone#

Address
Nc 24/27

Property Location SR#
The Highlands @ Sherwood Forest 40 3(42x72) Road Name
Subdivision Lot # # Bedrooms Proposed e51 AC
Lot Size

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: _____ Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITIRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 240 Ft.

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

French Drain: Linear feet required 350 Appx Depth of gravel 30"

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] 7-30-03
Signature of Authorized Agent for Harnett County of Harnett Date