

# IMPROVEMENT PERMIT

03-5-7627

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) Moore Home  New Installation  Septic Tank  
 Property Location: SR# NC 27  Repairs  Nitrification Line  
43 Pat Way  
 Subdivision Clearview Subd. Lot # 15

Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_  
 Number of Bedrooms Proposed: 4 (28x80) Lot Size: .78 AC

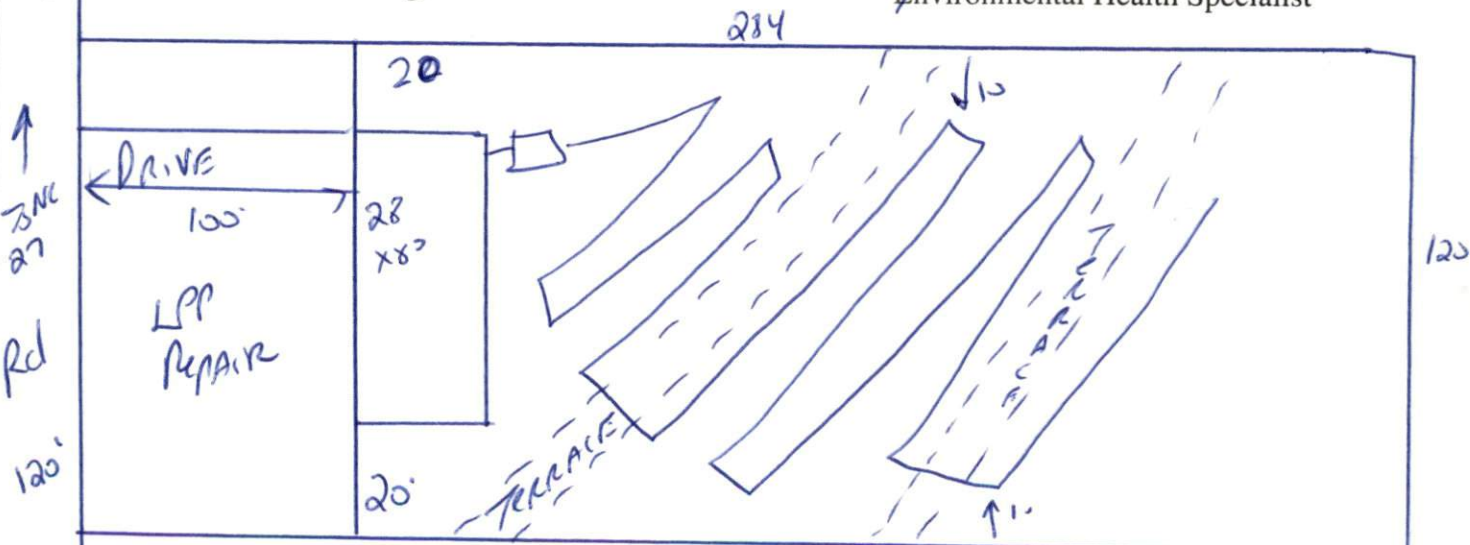
Basement with Plumbing:  Garage:   
 Water Supply:  Well  Public  Community  
 Distance From Well: 50 ft.

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 No. of exact length width of depth of  
 Drainage Field ditches 1 of each ditch 540 ft. ditches 3 ft. ditches 18 MAX in.  
 French Drain Required: \_\_\_\_\_ Linear feet

Date: 8-15-03  
 Signed: [Signature]  
 Environmental Health Specialist

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



Meet onsite 18" Ditch Depth maintain ALL set BACKS  
 Do not DRIVE or PARK 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 # 20192. 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 Moore Home Telephone# 910-814-3349

Address NC27

Property Location SR# Clearview Road Name 78 AC  
Subdivision 15 Lot # 41 (28x80) # Bedrooms Proposed 78 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 540 Ft.  
Width of ditches 3 ft. Depth of ditches 18 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 of Authorized Agent for Harnett County of Harnett [Signature] Date 8-15-07