

HTE 04-5-11010 R

IMPROVEMENT PERMIT

21495

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) CHOO CHOO Homes
Property Location: SR# NC24
New Installation, Septic Tank, Repairs, Nitrification Line

Subdivision Heritage Village Lot # G-23

Tax ID # Quadrant #

Number of Bedrooms Proposed: 3 (28x56) Lot Size: .45 ac

Basement with Plumbing: Garage:

Water Supply: Well, Public, Community

Distance From Well: 50 ft.

EXPIRED extended 3 yrs

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: gallons Pump Tank: gallons

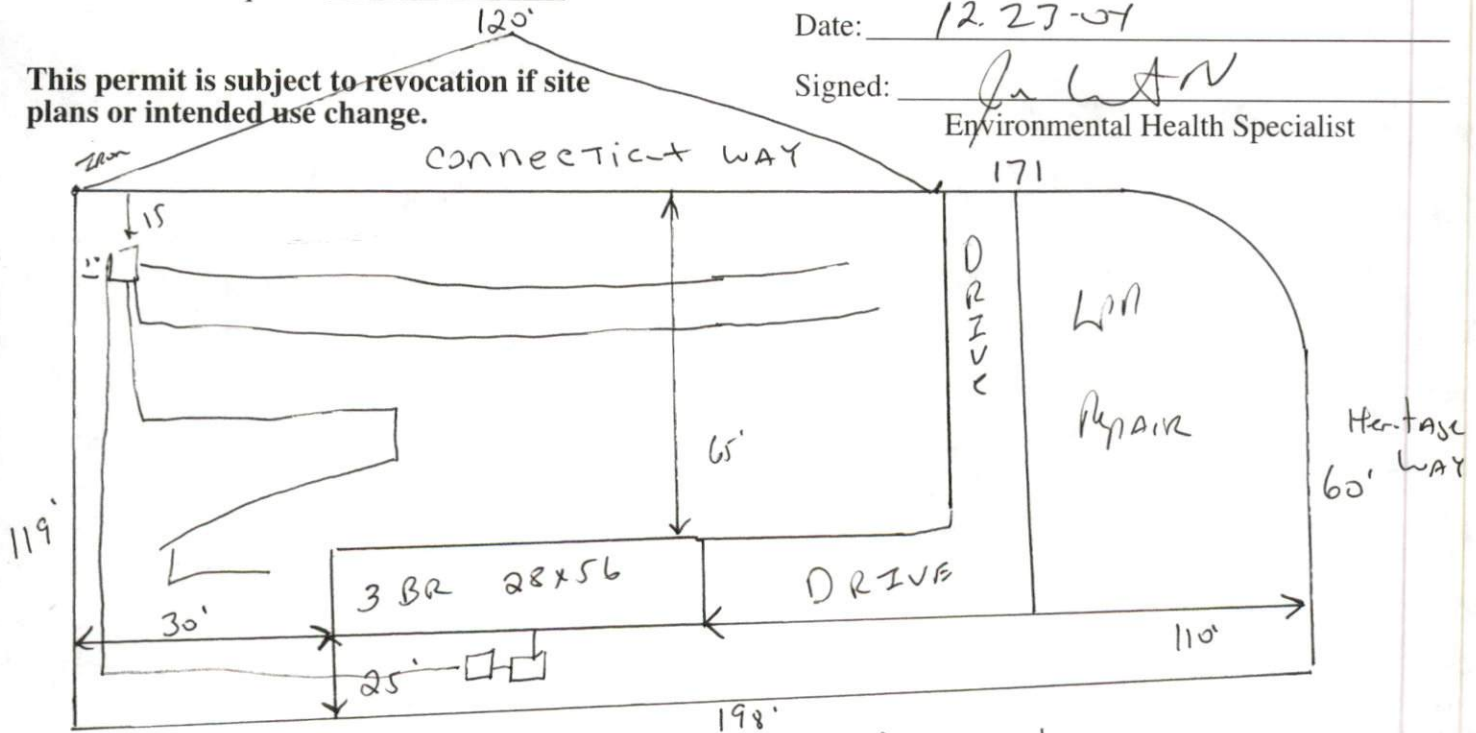
Subsurface Drainage Field No. of ditches 3 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 18 in.

French Drain Required: Linear feet of 25% Reduction system

Date: 12.27.07

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

Signed: Environmental Health Specialist



MUST meet on site prior to installing septic system
Final layout may change
Maintain all setbacks

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 # 21495. 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.*

Chao Choo

Name

Telephone #

Address

NC 24

Property Location SR#

Road Name

Heritage Village
Subdivision

G-23
Lot #

3 (28x56)
Bedrooms Proposed

.45m
Lot Size

TYPE OF SYSTEM

New Installation [] Repair Septic Tank Nitrification Lines

[] Conventional Other 25% Reduction System

[] Basement [] With Plumbing [] Without Plumbing

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

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 3 Length of lines 75 Ft.

Width of ditches 3 ft. Depth of ditches 18 inches of 25% Reduction System

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.

Joe West RS
Signature of Authorized Agent for Harnett County

12-23-04
Date