

HTE 0556011188

IMPROVEMENT PERMIT

21546

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) Patterson Real Estate/Choo Choo Homes New Installation Septic Tank
Property Location: SR# 1103 Repairs Nitrification Line

Subdivision \_\_\_\_\_ Lot # 1

Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 3 BR Lot Size: 1.3 Acres

Basement with Plumbing: [ ] Garage: [ ]

Water Supply: [ ] Well [X] 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: [X] Conventional [ ] Other \_\_\_\_\_

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

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 240 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain Required: \_\_\_\_\_ Linear feet

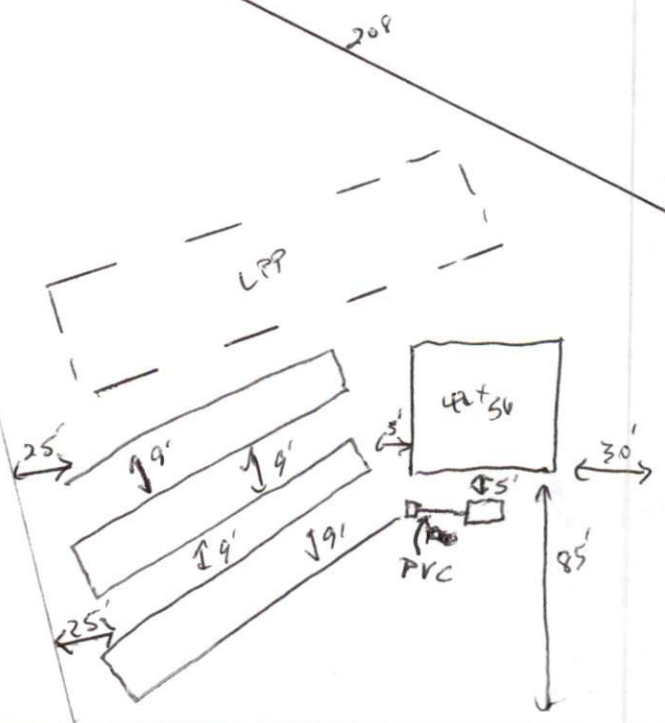
Date: 2-8-05

Signed: Heath Car Environmental Health Specialist

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

- X Keep lines on contour
X Apply stepdowns as needed
X Remain 25' from top of ditch bank
X System flagged out
X Will meet on-site if any questions

Ditch



CYPRESS RD

To Cypress Creek Rd

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 # 21546. 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.*

Patterson Homes 840-8787  
Name Telephone #

1254 Post Office Rd Sanford, NC 27330  
Address

1103 Cypress Rd  
Property Location SR# Road Name

1 3BR 1-3 Acres  
Subdivision Lot # # Bedrooms Proposed 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

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 1 Length of lines 240 Ft.  
Width of ditches 3 ft. Depth of ditches 18-24" 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.

Heath C.  
Signature of Authorized Agent for Harnett County

2-8-05  
Date