

HTE# 05-5-13011

IMPROVEMENT PERMIT 22253

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) VAN Stephen Murray New Installation Septic Tank Repair
 Property Location: SR# 1437 Ballard Rd. Nitrification Line Expansion
 Subdivision Strawberry Fields Lot # 1
 Tax ID# _____ Quadrant # _____
 Number of Bedrooms Proposed: 3 (360 gpd) Lot Size: .50 AC

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 _____

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

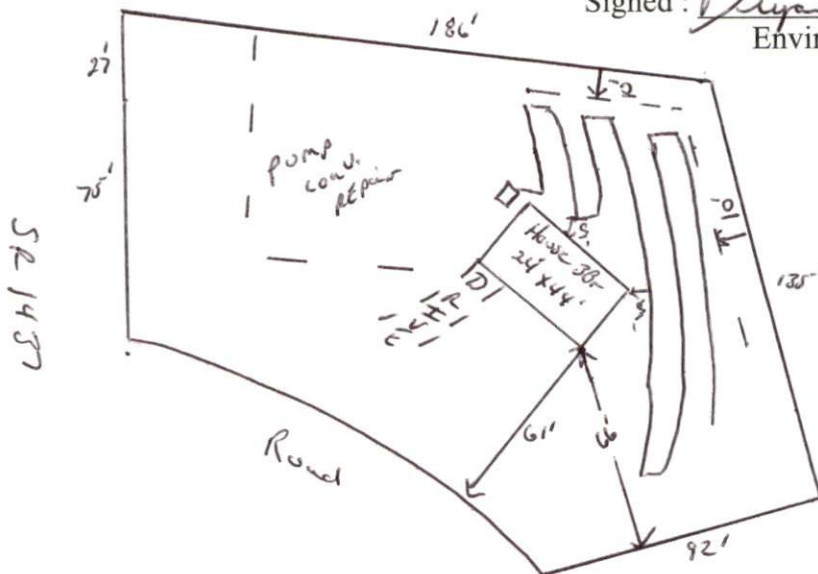
Subsurface No. of exact length width of depth of
 Drainage Field ditches 1 ft. of each ditch 300 ft. ditches 3 ft. ditches 18-24 in.

French Drain Required: _____ Linear feet

Date: 9/30/2005
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

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



* Maintain all setbacks
 * Run ditches on contour

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 # 22253. 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 VAN Stephen Murray Telephone # 919-557-1389

Address 5317 Shadow Valley Rd. Holly Springs, N.C. 27540

Property Location SR# 1437 Road Name Ballard

Subdivision Strawberry Fields Lot # 1 # Bedrooms Proposed 3 (360 gal) Lot Size .504c

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: 50 Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 300 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.

Bryce McSwain R.S.
Signature of Authorized Agent for Harnett County

9/20/2005
Date