

HTE#05-50013235

# IMPROVEMENT PERMIT 22459

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) HARLOW REALTY CORP. New Installation  Septic Tank  Repair

Property Location: SR# \_\_\_\_\_ Nitrification Line  Expansion

Subdivision KINNIS CREEK Lot # 39

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

Number of Bedrooms Proposed: 3 (360 sqd) Lot Size: 1.18 AC

Basement with Plumbing:  Garage:

Water Supply:  Well  Public  Community

Distance From Well: 100 ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system:  Conventional  Other 25% REDUCTION SYSTEM

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

Subsurface No. of exact length width of depth of  
Drainage Field ditches 3 ft. of each ditch 100 ft. ditches 3 ft. ditches 12 in.

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

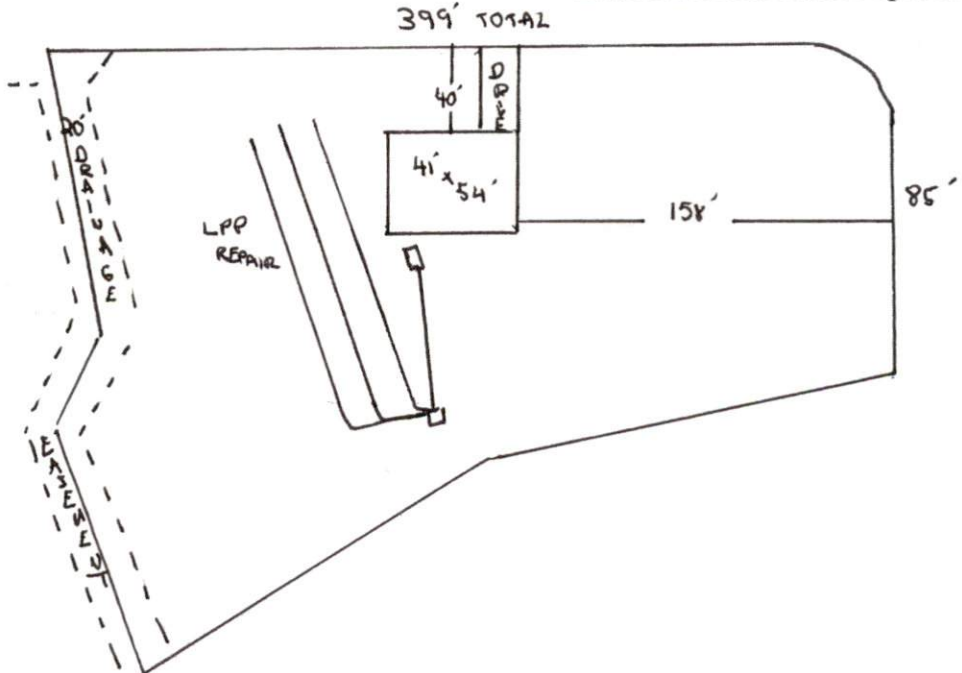
Date: 12/14/05  
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

\* AUTHORIZATION TO CONSTRUCT TO BE ISSUED AFTER SITE IS CHECKED AND MEETING WITH SEPTIC SYSTEM INSTALLER

Signed: [Signature] Environmental Health Specialist

\* SEE ALL NOTES ON A.C.



0-5-13235

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 # 22459. 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.***

HARLAN REALTY 919-639-3433  
Name Telephone #

56 E. WILLIAMS ST ANGIER NC 27501  
Address

Property Location SR# \_\_\_\_\_ Road Name \_\_\_\_\_  
KINNIS CK 39 3(360sqft) 1.18AC  
Subdivision Lot # # Bedrooms Proposed 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: 100 Ft.

Septic Tank 1000 gal Pump Chamber \_\_\_\_\_ gal

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 3 Length of lines 100 Ft.

Width of ditches 3 ft. Depth of ditches 12 inches \* MINIMUM OF 6" OF COVER NEEDED OVER DRAINFIELD

French Drain: Linear feet required \_\_\_\_\_ Depth of gravel \_\_\_\_\_ \* RUN LINES ON CONTOUR

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.

 RS  
Signature of Authorized Agent for Harnett County

3/22/06  
Date