

IMPROVEMENT PERMIT

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) Joseph L Lee☒ New Installation☒ Septic TankProperty Location: SR# 1532 Langdon☐ Repairs☒ Nitrification LineSubdivision _____ Lot # 4

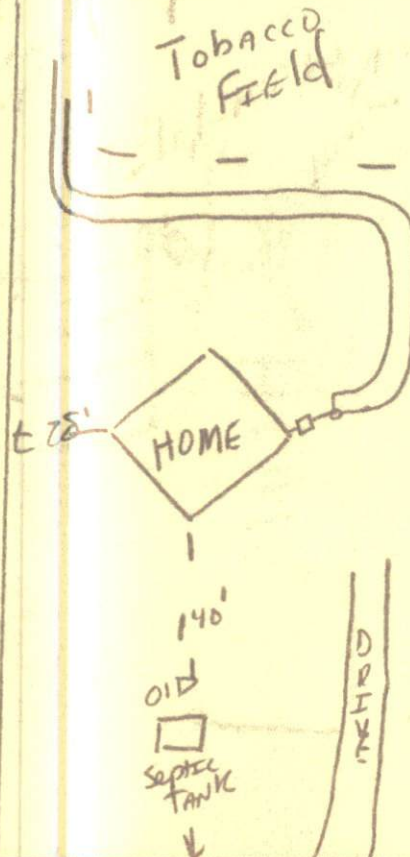
Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 2 Lot Size: 1 acreBasement with Plumbing: ☐ Garage: ☐Water Supply: ☐ Well ☒ Public ☐ CommunityDistance 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: _____ gallonsSubsurface Drainage Field No. of ditches 2 exact length of each ditch 120 ft. width of ditches 3 ft. depth of ditches 18-20 in.French Drain Required: - Linear feetDate: 7-8-02

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

Signed: James E. Markant
Environmental Health Specialist

SR 1532 Langdon

62-5.4964

**H ETT COUNTY HEALTH DEPARTMENT
AUTHORIZATION TO CONSTRUCT**

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 1324. 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.*

Joseph L Lee 919-552-1781
Name Telephone #
5301 Scott Rd Fugate VARIANA P.C. 27526
Address
1532 Landon Rd
Property Location SR# Road Name
4 2 1 acre
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 - Minimum Well Setback: 50' Ft.
Septic Tank 1000 Pump Chamber _____

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 2 Length of lines 120 Ft.

Width of ditches 3 ft. Depth of ditches 3 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.

James E. Marshall 7-8-02
Signature of Authorized Agent for Harnett County Date