

#03-5-6676

HARNETT COUNTY HEALTH DEPARTMENT

No 19962

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) FELICIANO AVILEZ

New Installation  Septic Tank

Property Location: SR# 1412 Christian Light

Repairs  Nitrification Line

Subdivision Shered Forest Lot # 1

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

Number of Bedrooms Proposed: 3 Lot Size: 1.51 Acre

Basement with Plumbing:  Garage:

Water Supply:  Well  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:  Conventional  Other \_\_\_\_\_

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

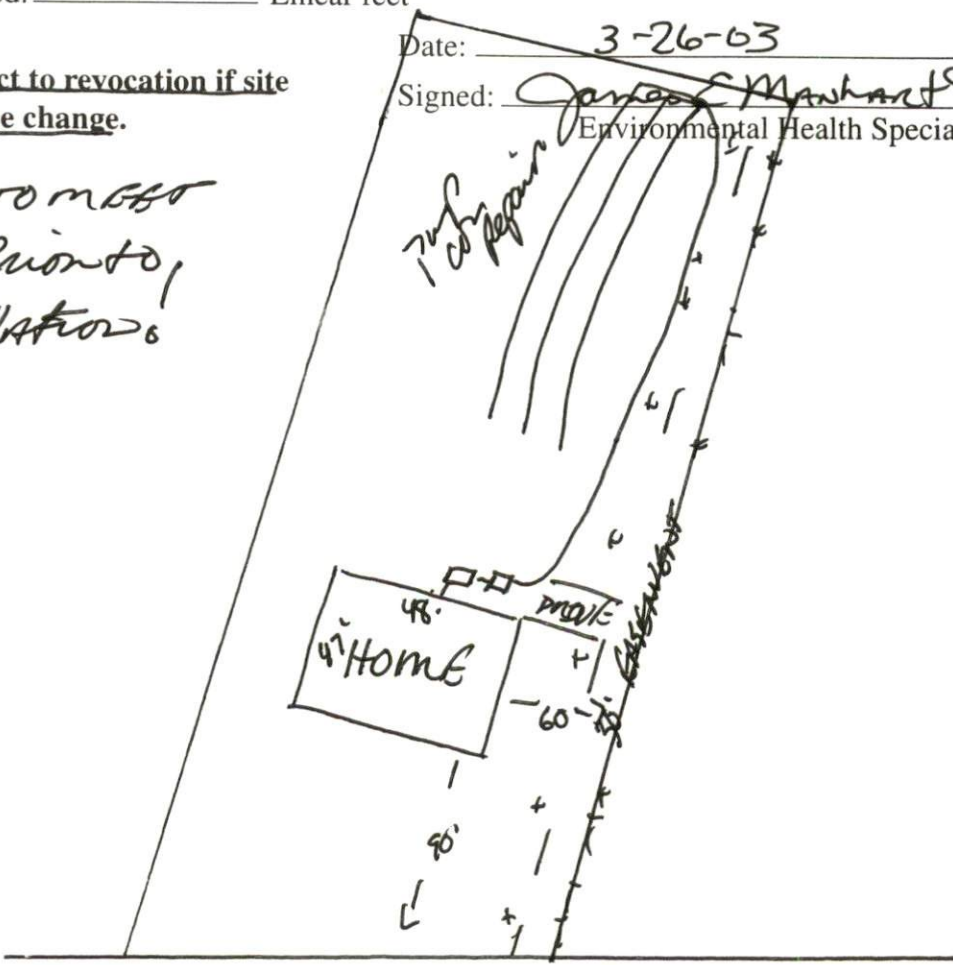
Subsurface Drainage Field No. of ditches 3 exact length of each ditch 115 ft. width of ditches 3 ft. depth of ditches 18" in.

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

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

Date: 3-26-03  
Signed: *James F. Manhart* D.R.S.  
Environmental Health Specialist

\* CONTRACTOR TO MGOB  
ON SITE PRIOR TO  
INSTALLATION



SR 1412 CHRISTIAN LIGHT RD

### HARNETT 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 # 19962. 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 FELICIANO AVILEZ Telephone# 919-291-7988

Address 355 Charta St F.V. N.C. 27526

Property Location SR# 1412 Road Name Christin Light

Subdivision Shenod Forest Lot # 1 # Bedrooms Proposed 3 Lot Size 1.51 Acre

#### 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

#### NITIRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 3 Length of lines 115 Ft.

Width of ditches 3 ft. Depth of ditches 18 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  
Signature of Authorized Agent for Harnett County of Harnett

3-26-03  
Date