

HTE 04-5-10365/1217

IMPROVEMENT PERMIT

21362

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) Thomas McManus
Property Location: SR# 1557 Silas Moore RD
New Installation, Septic Tank, Repairs, Nitrification Line

Subdivision Quail Hollow Lot # 16

Tax ID # Quadrant #

Number of Bedrooms Proposed: 3 Lot Size: .57

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

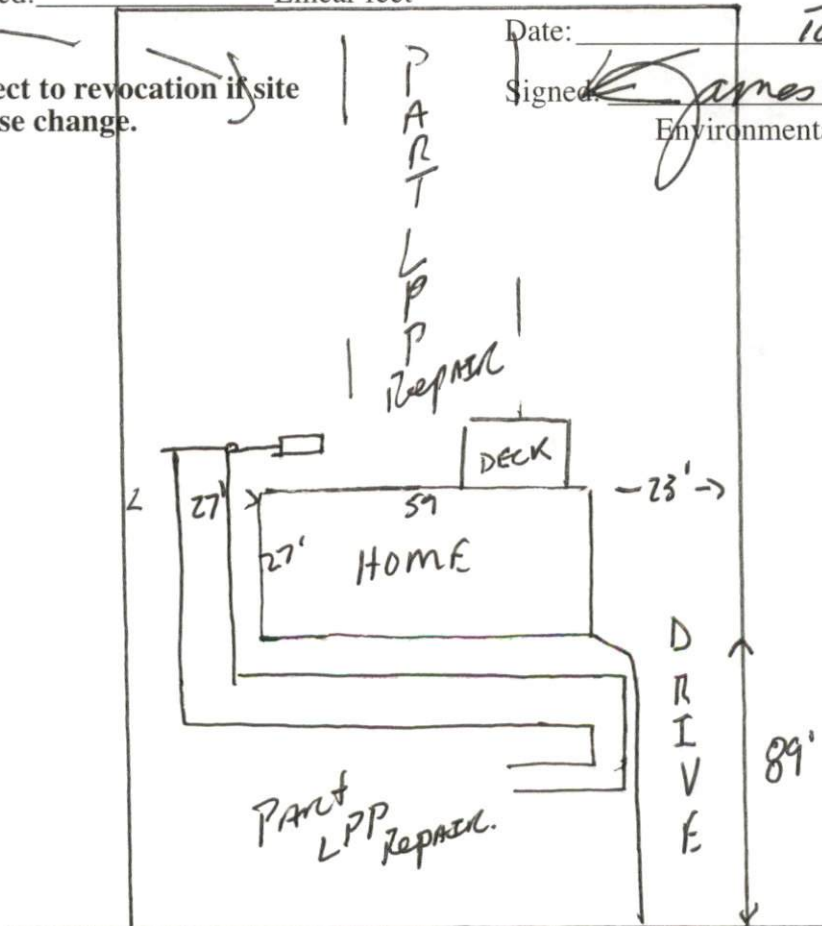
Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons

Subsurface Drainage Field: No. of ditches 2, exact length of each ditch 120 ft., width of ditches 3 ft., depth of ditches 24 in.

French Drain Required: Linear feet

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

Date: 10-19-04
Signed: James E. Markhart, Environmental Health Specialist



SR 1557 SILAS MOORE

#04-5-103652R

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 # 21362. 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 Thomas McManus Telephone# 919-796-2639

Address 811 West Johnson St Raleigh N.C. 27605

Property Location SR# 1557 Road Name Silas Moore Rd

Subdivision Quail Hollow Lot # 16 # Bedrooms Proposed 3 Lot Size .59

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

NITIRIFICATION FIELD SPECIFICATIONS

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

Width of ditches 3 ft. Depth of ditches 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.

James E. Markham
Signature of Authorized Agent for Harnett County of Harnett

10-19-04
Date