

HTE 04-5-8784

IMPROVEMENT PERMIT

20753

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) Glenda Moore New Installation Septic Tank
Property Location: SR# 1703 Red Hill - Town onto SUGGS RD Repairs Nitrification Line

Subdivision WALTS CROSSING Lot # 8

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: .63

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 25% reduction

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

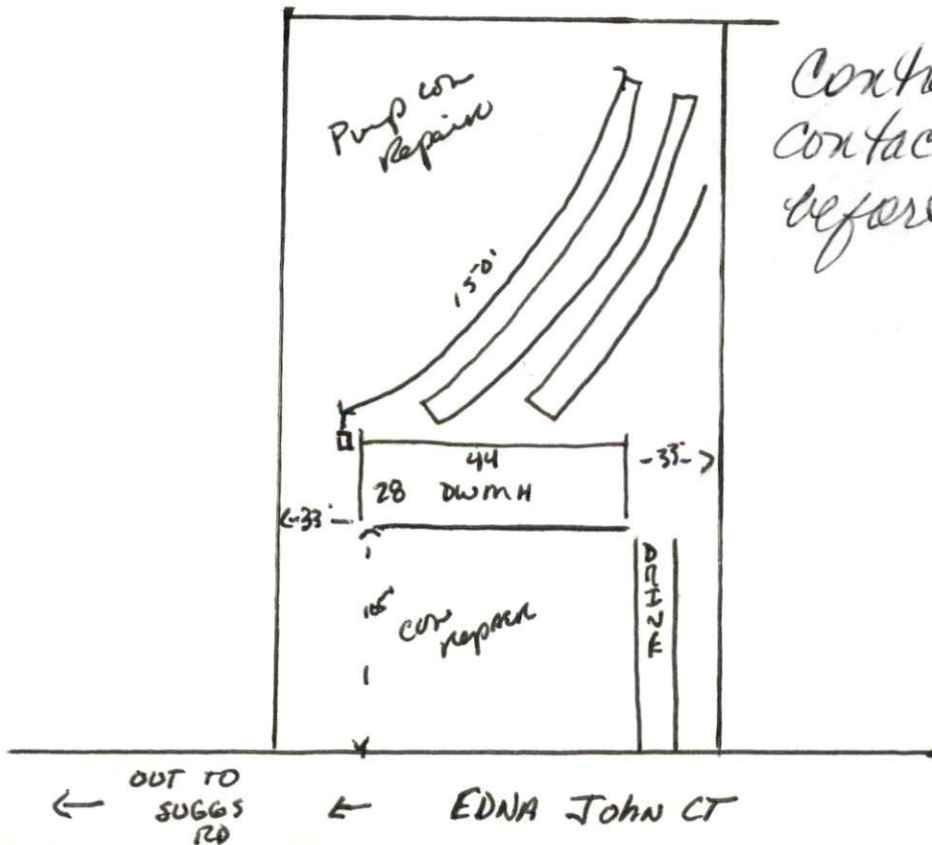
Subsurface Drainage Field No. of ditches 1 exact length 300 width of ditches 3 depth of ditches 16" in. ^{may}
of each ditch 400 ft.

French Drain Required: _____ Linear feet

Date: 3-8-04

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

Signed James C. Markant
Environmental Health Specialist



Contractor to contact inspector before installing.

#04-5-8784

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 # 20753. 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.*

Glenda Moore Name 919-630-0408 Telephone #

Edna John CT DUNN N.C. 28334 Address

1703 Property Location SR# Red Hill Church RD Road Name

Watts Crossing Subdivision 8 Lot # 3 # Bedrooms Proposed .63 Lot Size

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other 25% reduction

Basement With Plumbing Without Plumbing

Water Supply: Well Public Water Supply Minimum Well Setback: 5'0 Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 1 Length of lines 300 Ft. ~~400~~

Width of ditches 3 ft. Depth of ditches 16" deep 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. Manhart Signature of Authorized Agent for Harnett County

3-8-04 Date