

HARNETT COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT

22018

HTE 05-5-12073

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) IVAN DANIEL HONEYCUTT
Property Location: SR# 1740 Antioch Church Rd TL on Rainbow TL on Jackson Lot on Right.
New Installation
Septic Tank
Repairs
Nitrification Line

Subdivision HANNAH HEIGHTS Lot # 62-53-61

Tax ID # Quadrant #

Number of Bedrooms Proposed: 2 Lot Size: .5 ACRES

Basement with Plumbing: Garage:
Water Supply: Well Public Community
Distance From Well: 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

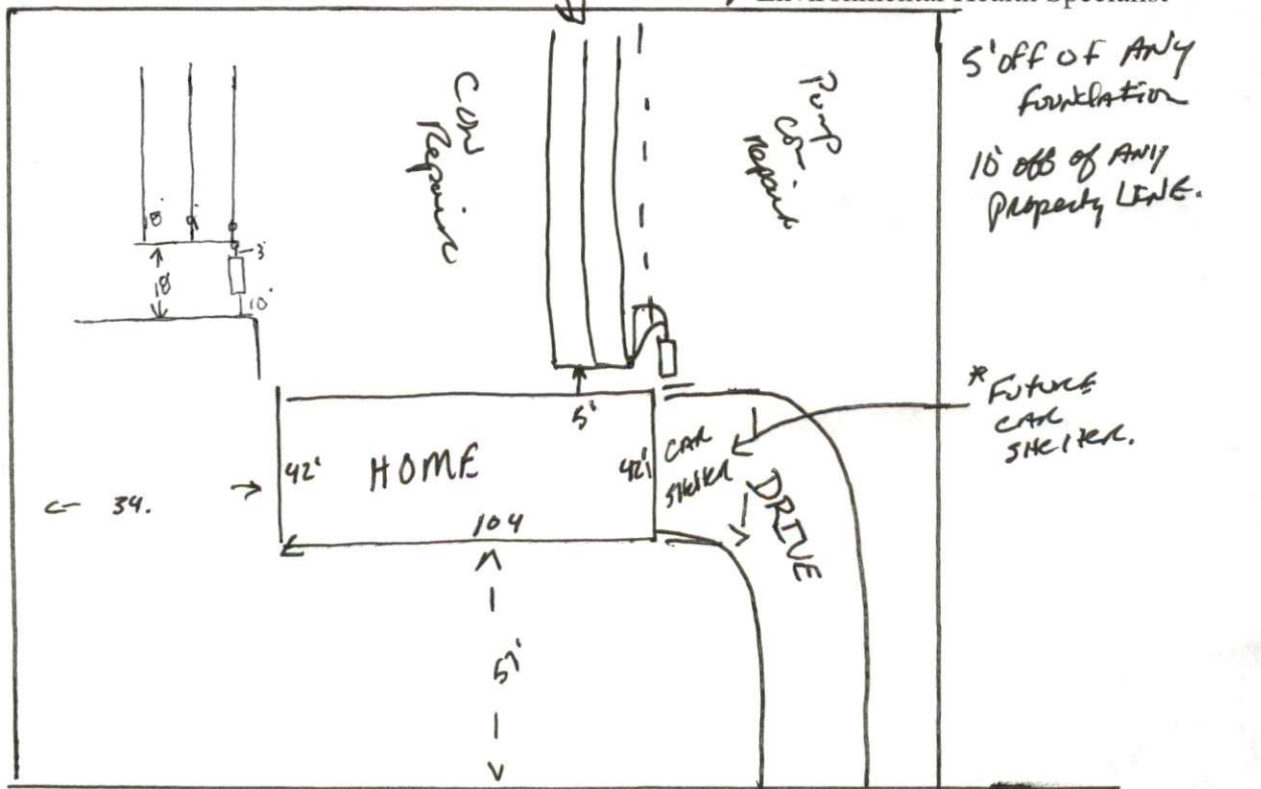
Subsurface Drainage Field No. of ditches 3 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 18" max

French Drain Required: Linear feet

Date: 5-23-05

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

Signed: James E. Manlanders Environmental Health Specialist



RAINBOW DR

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 # 22018. 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.*

IVAN DANIEL Honeycutt Name 910-818-4649 Telephone #

P.O. BOX 1473 Lillington N.C. Address

1740 Property Location SR# Antioch Road Name

Hannal Heights Subdivision 62-63-64 Lot # 2 # Bedrooms Proposed 15 Lot Size

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

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 3 Length of lines 75 Ft.

Width of ditches 3 ft. Depth of ditches 18" max 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

5-23-05
Date