

HTE# 06-5-14626

IMPROVEMENT PERMIT 22898

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) Sofia A MARTINEZ New Installation Septic Tank Repair

Property Location: SR# 1727 SUBGSS RD Nitrification Line Expansion

Subdivision WAITS CROSSING Lot # 14

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed : 5 BRN 6006 PD Lot Size: 1 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 25% Reduction System

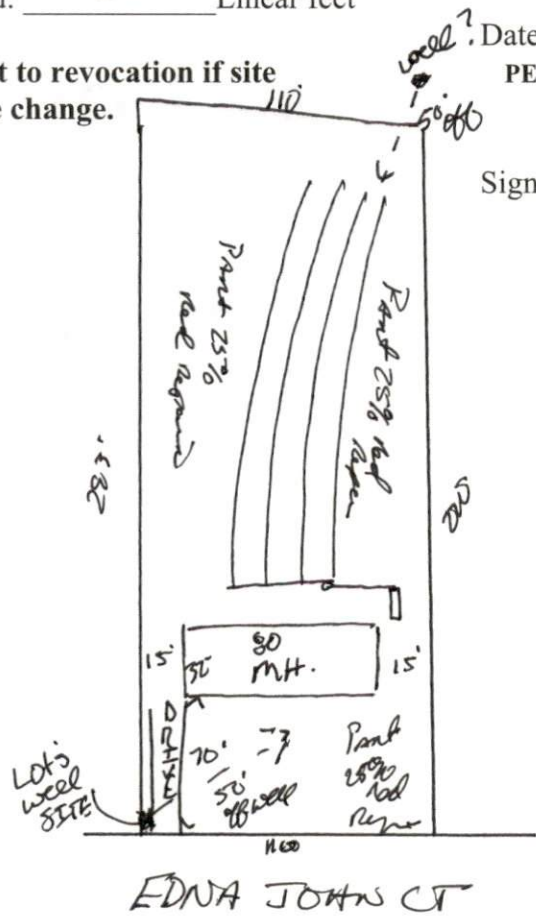
Size of tank: Septic Tank: 1200 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 4 ft. exact length of each ditch 120 ft. width of ditches 3 ft. depth of ditches 22" rap in.

French Drain Required: - Linear feet

This permit is subject to revocation if site plans or intended use change. Date: 5-5-06 PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

Signed: James E. Markant
Environmental Health Specialist



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 # 22898. 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 Sofia A MARTINEZ Telephone # 910-852-2254

Address P.O. BOX 159 Lenoir N.C. 28339

Property Location SR# 1727 Road Name SUGGS RD

Subdivision WALTS Crossing Lot # 14 # Bedrooms Proposed 5 BRN 600GPD Lot Size 1.7 ac

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other 25% red system

Basement With Plumbing Without Plumbing

Water Supply: Well Public Water Supply Minimum Well Setback: 50 Ft.

Septic Tank 1200 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 4 Length of lines 120 Ft.

Width of ditches 3 ft. Depth of ditches 22" 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. Marston
Signature of Authorized Agent for Harnett County

5-5-06
Date