



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 # 22966. 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.*

ASHNORTH, JEFF & TRACY 625-3413  
Name Telephone #

134 ROY ADAMS RD ANGIER NC 27501  
Address

HWY 55 \_\_\_\_\_  
Property Location SR# Road Name

BRAXTON 12 3 (360gpd) 74  
Subdivision Lot # # Bedrooms Proposed Lot Size

**TYPE OF SYSTEM**

New Installation [ ] Repair  Septic Tank  Nitrification Lines

[ ] Conventional  Other PUMP TO 25% REDUCTION

[ ] Basement [ ] With Plumbing [ ] Without Plumbing

Water Supply: [ ] Well  Public Water Supply Minimum Well Setback: 100 Ft.

Septic Tank 1000 gal Pump Chamber 1000 gal

**NITRIFICATION FIELD SPECIFICATIONS**

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

Width of ditches 3 ft. Depth of ditches 18-20 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.

[Signature]  
Signature of Authorized Agent for Harnett County

5/16/06  
Date