

HTE# 03-5-6267RR

IMPROVEMENT PERMIT 22563

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) Mickey Barbour New Installation Septic Tank Repair
 Property Location: SR# 1400 Hobby Rd. Nitrification Line Expansion
 Subdivision _____ Lot # _____
 Tax ID# _____ Quadrant # _____
 Number of Bedrooms Proposed: 4 (480 gal) Lot Size: 6.64Ac

Basement with Plumbing: Garage:
 Water Supply: Well Public Community
 Distance From Well: 50m 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 No. of exact length width of depth of
 Drainage Field ditches 5 #. of each ditch 110 ft. ditches 3 ft. ditches 18 in.

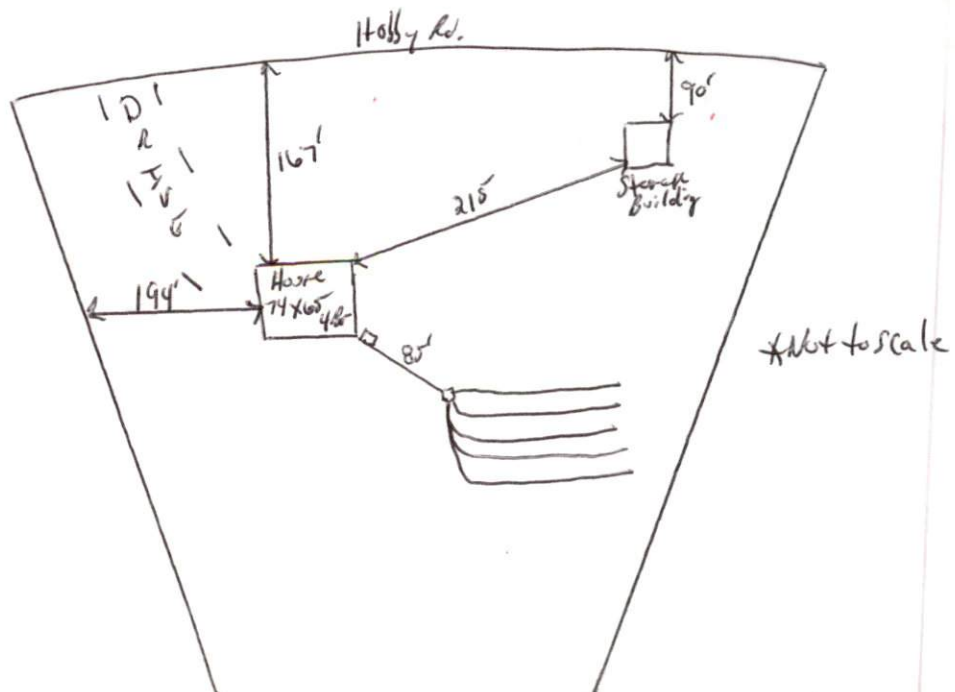
French Drain Required: _____ Linear feet

Date: 3/15/2006
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

Signed: Brya McSwain, R.S.
 Environmental Health Specialist

* Maintain all setbacks
 * Round ditches on contour
 * Septic tank must be 15 ft. from house
 * If fall cannot be achieved then a 1000 gal pump tank will be required



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 # 22563. 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.***

Mickey Barbour Name 919 639 8387 Telephone #

205 Kinnis Creek Rd. Anger, N.C. 27501 Address

1400 Property Location SR# Hubby Road Name

Subdivision _____ Lot # _____ # Bedrooms Proposed 4 (4800 sq ft) Lot Size 6.64 ac

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 1000, fused gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 5 Length of lines 110 Ft.

Width of ditches 3 ft. Depth of ditches 18 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.

Bryan M. Smith, P.E.
Signature of Authorized Agent for Harnett County

3/15/2006
Date