

HTE 04-5-10064 RRR

IMPROVEMENT PERMIT

21668

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) JOHN JOHNSON
Property Location: SR# 1211 BELLA BRIDGE RD
New Installation, Septic Tank, Repairs, Nitrification Line

Subdivision ROETIA TAYLOR ETALS Lot # 1

Tax ID # Quadrant #

Number of Bedrooms Proposed: 2 Lot Size: 21.29 AC

Basement with Plumbing: Garage:

Water Supply: Well, Public, Community

Distance From Well: 100 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: 90 ft. width of ditches: 3 ft. depth of ditches: 18-24 in.

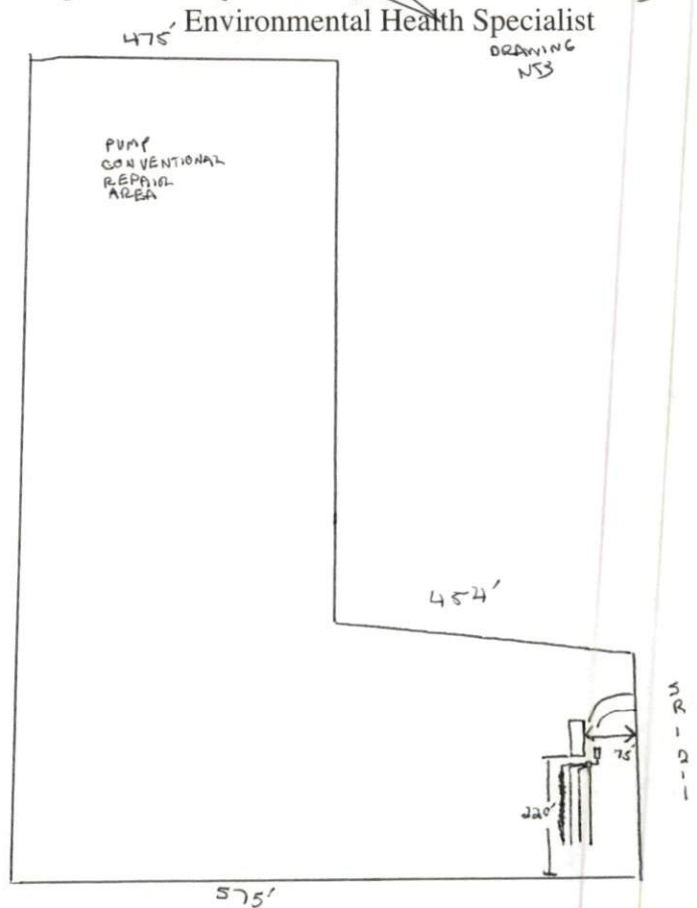
French Drain Required: Linear feet

Date: 2/10/05

Signed: [Signature] Environmental Health Specialist

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

\*MAINTAIN ALL SETBACKS
\*CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION
PERMIT REVISED ON 5/27/05
2 BEDROOM HOUSE
SYSTEM SIZE REDUCED
OT



SR 1211

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 # 21668. 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.*

JOHN JOHNSON 919-299-7764  
Name Telephone #

7267 HWY 87 SANFORD NC 27332  
Address

1211 BELLA BRIDGE RD  
Property Location SR# Road Name

ROBERTA TAYLOR ERAS 1 2 21.29 ac  
Subdivision Lot # # Bedrooms Proposed Lot Size

**TYPE OF SYSTEM**

- New Installation [ ] Repair [input checked="" type="checkbox"/> Septic Tank [input checked="" type="checkbox"/> Nitrification Lines  
 Conventional [ ] Other \_\_\_\_\_  
[ ] Basement [ ] With Plumbing [ ] Without Plumbing

Water Supply: [ ] Well [input checked="" type="checkbox"/> Public Water Supply Minimum Well Setback: 100 Ft.  
Septic Tank 1000 gal Pump Chamber \_\_\_\_\_ gal

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 3 Length of lines 90 Ft.  
Width of ditches 3 ft. Depth of ditches 18-24 inches  
French Drain: Linear feet required \_\_\_\_\_ Depth of gravel \_\_\_\_\_

5/27/05  
New Date

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] RS  
Signature of Authorized Agent for Harnett County

5/10/05  
Date