

HTE 04-50010270

IMPROVEMENT PERMIT

21418

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) JASON PRICE CONST.
Property Location: SR# 421
New Installation, Septic Tank, Repairs, Nitrification Line

Subdivision MYRTLEWOOD Lot # 5+6

Tax ID # Quadrant #

Number of Bedrooms Proposed: 5 Lot Size: 1.85 ac

Basement with Plumbing: Garage: [X]

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 PRESSURE MANIFOLD TO INNOVATIVE DRAINLINES

Size of tank: Septic Tank: 1250 gallons Pump Tank: 1250 gallons

Subsurface Drainage Field: No. of ditches 6, exact length of each ditch VARIES ft. SEE ATTACHED, width of ditches 3 ft., depth of ditches 12-18 in.

French Drain Required: Linear feet

Date: 11/12/04

Signed: [Signature] Environmental Health Specialist

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

- \*SEE ATTACHED SHEETS FOR SYSTEM DESIGN AND LAYOUT
\*DRAIN FIELD AREA NEEDS TO BE PROTECTED FROM CONSTRUCTION TRAFFIC. SITE DISTURBANCE MAY VOID PERMIT.
\*CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION

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 # 21418. 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.*

JASON PRICE CONSTRUCTION 897-8811  
Name Telephone #

PO BOX 261 ERWIN NC 28339  
Address

421  
Property Location SR# Road Name

MYRTLEWOOD 5+6 5 1.85AC  
Subdivision Lot # # Bedrooms Proposed Lot Size

**TYPE OF SYSTEM**

- New Installation [ ] Repair  Septic Tank  Nitrification Lines  
[ ] Conventional  Other PRESSURE MANIFOLD TO INNOVATIVE LINE  
[ ] Basement [ ] With Plumbing [ ] Without Plumbing

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

Septic Tank 1250 gal Pump Chamber 1250 gal

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 6 Length of lines VARIES Ft.

Width of ditches 3 ft. Depth of ditches 12-18 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.

[Signature]  
Signature of Authorized Agent for Harnett County

11/12/04  
Date