

HTE 045 10986

IMPROVEMENT PERMIT

21502

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) Danny Norris
Property Location: SR# 9115
New Installation [checked]
Septic Tank [checked]
Repairs [unchecked]
Nitrification Line [checked]

Subdivision CRESTVIEW Lot # 158

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (55x34) Lot Size: 95x160x95x160

Basement with Plumbing: [unchecked] Garage: [checked]

Water Supply: [unchecked] Well [checked] Public [checked] Community [unchecked]

Distance From Well: _____ ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: [unchecked] Conventional [checked] Other Pump to Conventional

Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons

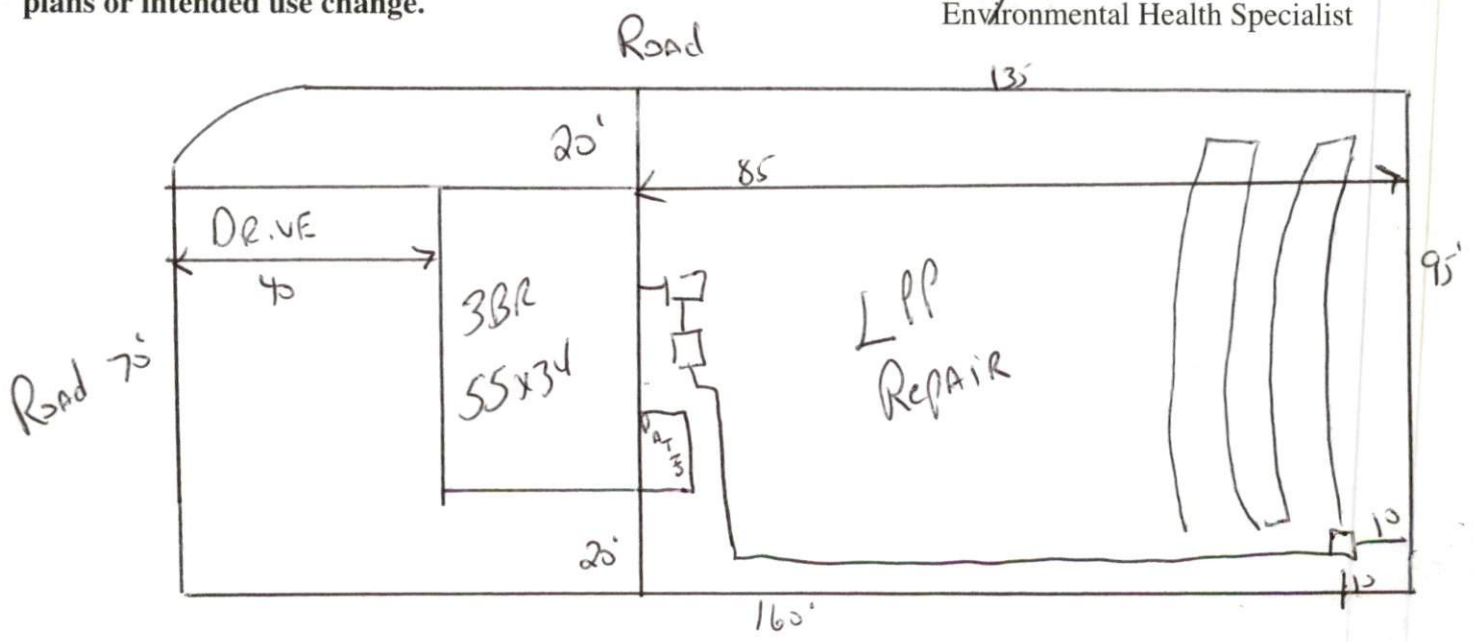
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 200 ft. width of ditches 3 ft. depth of ditches 18 1/4 in.

French Drain Required: _____ Linear feet

Date: 01-07-05

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

Signed: Joe Wade Environmental Health Specialist



MAINTAIN ALL SET BACKS
Meet onsite if you have any questions

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 # 21502. 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.*

Danny Norris
Name

Telephone #

Address

1115
Property Location SR#

Road Name

Crestview
Subdivision

158
Lot #

3 (55x34)
Bedrooms Proposed

96x160x96x160
Lot Size

TYPE OF SYSTEM

New Installation [] Repair Septic Tank Nitrification Lines

[] Conventional Other Pump to Converter

[] Basement [] With Plumbing [] Without Plumbing

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

Septic Tank 1000 gal Pump Chamber 1000 gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 200 Ft.

Width of ditches 3 ft. Depth of ditches 18-24 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.

Joe West RS
Signature of Authorized Agent for Harnett County

01-07-05
Date