

IMPROVEMENT PERMIT

21605

HTE 05-5-11105

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) LANDMARK 100, LLC
Property Location: SR# 55W
New Installation, Septic Tank, Repairs, Nitrification Line

Subdivision WILDWINDS Lot # 1

Tax ID # Quadrant #

Number of Bedrooms Proposed: 3 Lot Size: .68

Basement with Plumbing: Garage:
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

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

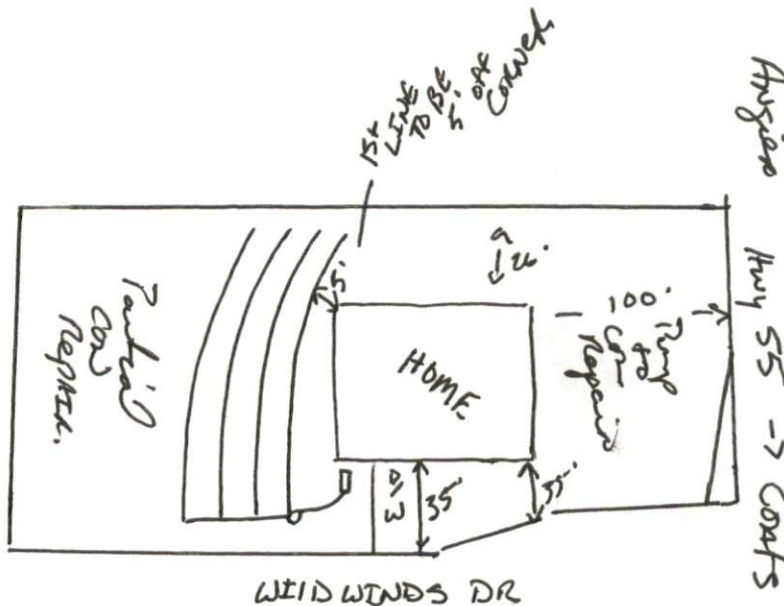
Subsurface Drainage Field No. of ditches 4 exact length of each ditch 80 ft. width of ditches 3 ft. depth of ditches 20-18 in.

French Drain Required: Linear feet

Date: 1-21-05

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

Signed: James E. Marham, Environmental Health Specialist



05-5-11105

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 # 21605. 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.*

Name Landmark 100 LLC Telephone # 910-230-4507

Address P.O. Box 643 DUNN N.C. 28335

Property Location SR# 55 Road Name 55

Subdivision Weldwinds Lot # 1 # Bedrooms Proposed 3 Lot Size .68

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: _____ Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 4 Length of lines 80 Ft.

Width of ditches 3 ft. Depth of ditches 20-28 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 of Authorized Agent for Harnett County James E. Markland

Date 1-21-05