

HTE 05-5-11901R

IMPROVEMENT PERM.

21960

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) Mike Roy New Installation Septic Tank
Property Location: SR# 129/ 0/d 08421 Repairs Nitrification Line

Subdivision Mane Bell Ridge Lot # 12

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: .85 Ac

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50 min ft.

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

Type of system: Conventional Other 25% reduction system

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

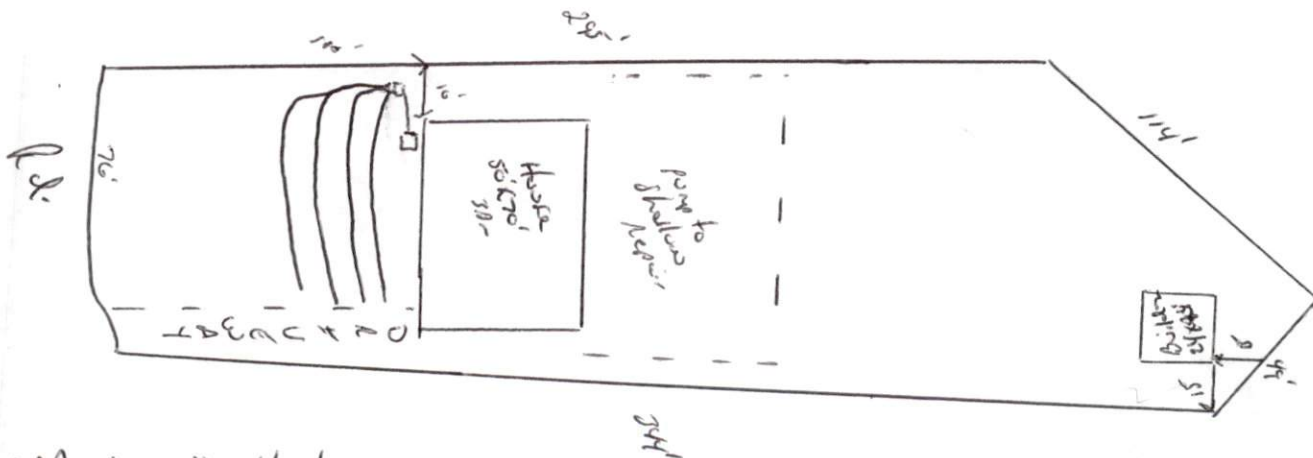
Subsurface Drainage Field No. of ditches 4 exact length of each ditch 70 ft. width of ditches 3 ft. depth of ditches 18 in.

French Drain Required: _____ Linear feet

Date: 4/27/2008

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

Signed: [Signature]
Environmental Health Specialist



- * Maintain all setbacks
- * Run ditches on contour
- * NO DEEPER than 18 inches

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 # 21960. 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 M. Ke Ruy Telephone # 919 498 382

Address 3417 Spring H. Hill Rd. Lillington, N.C. 27546

Property Location SR# 06105421 Road Name _____

Subdivision Maine Bell Ridge Lot # 12 # Bedrooms Proposed 3 Lot Size 854c

TYPE OF SYSTEM

- New Installation Repair Septic Tank Nitrification Lines
- Conventional Other 25% Reduct. in System
- Basement With Plumbing Without Plumbing

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

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 4 Length of lines 70 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.

[Signature]
Signature of Authorized Agent for Harnett County

4/27/2005
Date