

HARNETT COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT

21969

HTE 05-5-11962

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) James Ray  New Installation  Septic Tank  
Property Location: SR# 1291 0/d 05421  Repairs  Nitrification Line

Subdivision Maine Bell Ridge Lot # 23

Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 3 Lot Size: .824c

Basement with Plumbing:  Garage:

Water Supply:  Well  Public  Community

Distance From Well: 50 in ft.

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

Type of system:  Conventional  Other Link to 25% Redirection System

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

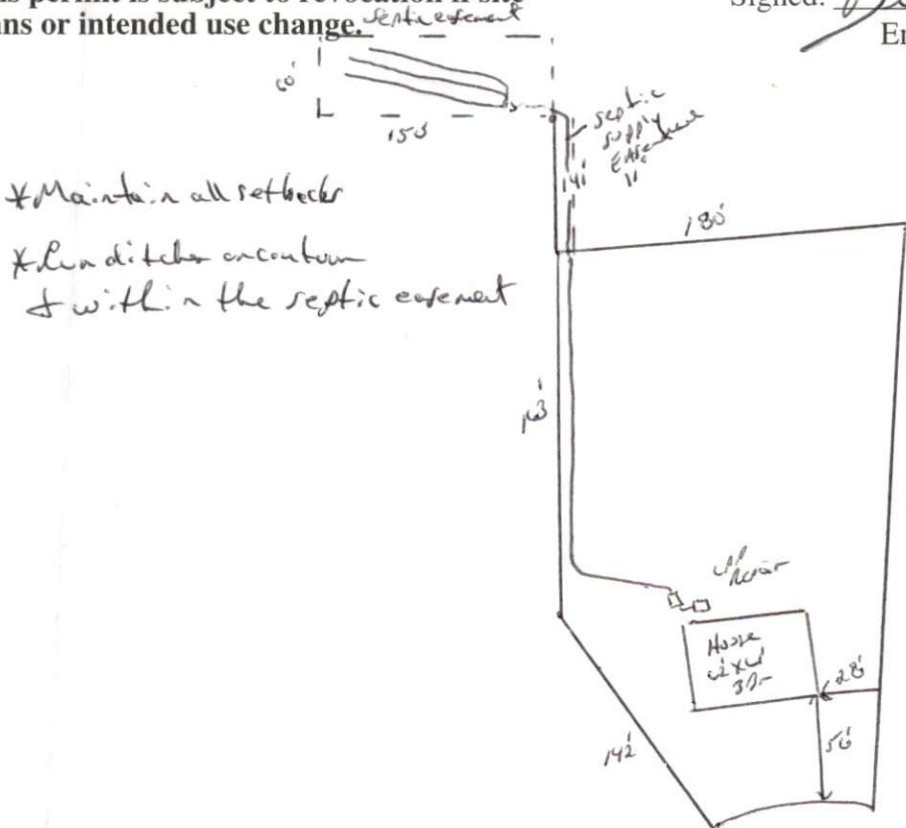
Subsurface Drainage Field No. of 3 exact length 100 width of 3 depth of 18 in. max  
ditches 4 of each ditch 80 ft. ditches 3 ft. ditches 18 in. max

French Drain Required: \_\_\_\_\_ Linear feet

Date: 5/3/2005

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

Signed: Supa McJin L.S.  
Environmental Health Specialist



\*Maintain all setbacks  
\*Don't dig ditches on contour  
& within the septic easement

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 # 21969. 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.*

James Ray Name 893 3281 Telephone #

86 CPS Forest Rd. Lillington, N.C. 27546 Address

1291 Property Location SR# Old US 421 Road Name

Maine Bell Ridge Subdivision 23 Lot # 3 # Bedrooms Proposed .92 A Lot Size

**TYPE OF SYSTEM**

New Installation  Repair  Septic Tank  Nitrification Lines

Conventional  Other Pump to 25% elevation

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 3<sup>4</sup> Length of lines 80<sup>80</sup> 100 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

5/2/2005  
Date