

HTE# 05-5-129072

IMPROVEMENT PERMIT 22758

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) DARY HUGHES New Installation Septic Tank Repair

Property Location: SR# 1443 LAGAYETTE Nitrification Line Expansion

Subdivision V.H. Lot # 130

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (360 sq ft) Lot Size: 34,324 sq ft

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 25% Red System

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

Subsurface No. of 3 exact length width of depth of
Drainage Field ditches 4 ft. of each ditch 90 ft. ditches 3 ft. ditches 24 in.

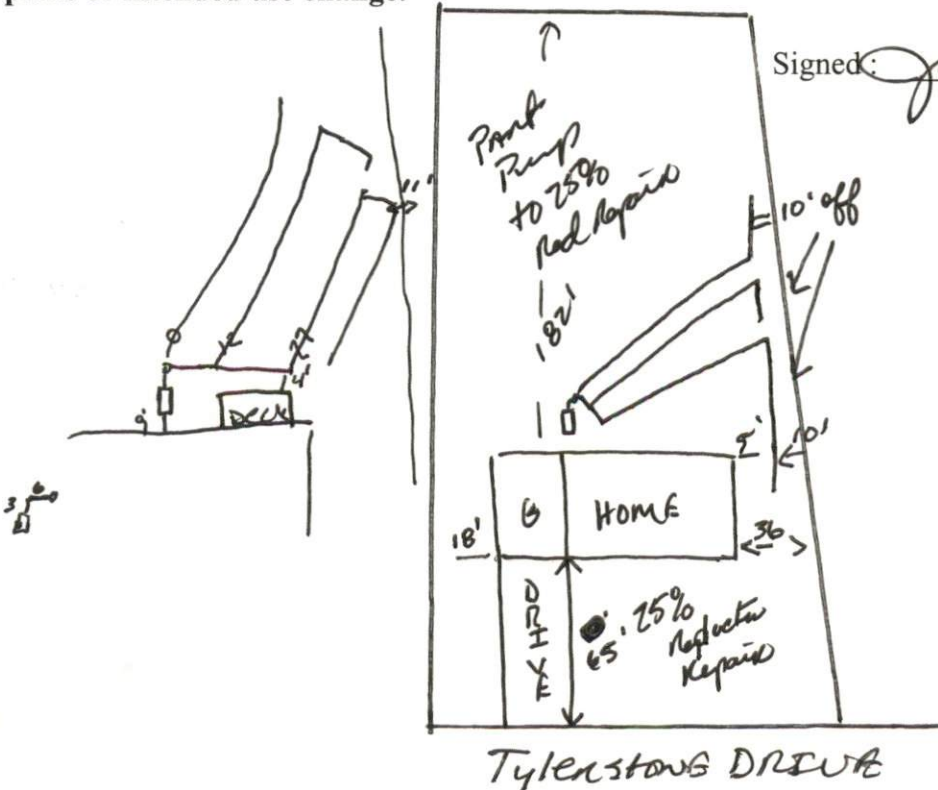
French Drain Required: - Linear feet

Date: 9-26-05

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

PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

Signed: James E. Marshant
Environmental Health Specialist



HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT 05-5-1290712

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 22758. 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 Dary HUGHES Telephone # 919-639-6594

Address 3055 OLD BUCKS CREEK RD Angier N.C. 27501

Property Location SR# 1443 Road Name Lafayette

Subdivision V.H. Lot # 130 # Bedrooms Proposed 3 (360gal) Lot Size 34,324 sqft

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other 25% Reduction

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 3 Length of lines 100 Ft.

Width of ditches 3 ft. Depth of ditches 24 max 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.

James E. Mawhan
Signature of Authorized Agent for Harnett County

5-26-05
Date