IMPROVEMENT PERMIT 22555

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) Confort Honer New Installation Septic Tank Repair
Property Location: SR# 1412 Chr. St. S. C. L. Witrification Line Expansion
Subdivision Forest Tolls Lot # 57
Tax ID# Quadrant # Number of Bedrooms Proposed: 3 (360 g/d) Lot Size: , 4614c
Basement with Plumbing: Garage:
Water Supply: Well Public Community
Distance From Well: 502 ft.
Following is the minimum specifications for sewage disposal system on above captioned property.
Subject to final approval.
Type of system:
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of
Subsurface No. of exact length width of depth of Drainage Field ditches 4 to of each ditch 75 ft. ditches 3 ft. ditches 15-24 in.
French Drain Required:Linear feet This permit is subject to revocation if site plans or intended use change. Date:
* Maintain all setbacks Signed: Buya Mc Signed: Environmental Health Specialist
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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 # 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.
Confort Honer Name 9195533242 Telephone#
P.O.Box 369 Clayton, N.C. 27528 Address
1412 Christian Light Property Location SR# Road Name
Forest Trials 57 3(360 grd) .4614c Subdivision Lot # Bedrooms Proposed Lot Size
TYPE OF SYSTEM [New Installation [] Repair
[] Conventional [] Other
[] Basement [] With Plumbing [] Without Plumbing
Water Supply: [] Well [Public Water Supply Minimum Well Setback: Ft.
Septic Tank gal Pump Chamber gal
NITRIFICATION FIELD SPECIFICATIONS
Number of fields # of lines per field # Length of lines Ft.
Width of ditches ft. Depth of ditches 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.
Bryan Misser R.S. 2/7/2006 Signature of Authorized Agent for Harnett County Date