

HTE# 05-5-13758R

# IMPROVEMENT PERMIT 22366

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) Michael Anderson Homes Inc New Installation  Septic Tank  Repair

Property Location: SR# 1443 LAFAYETTE RD Nitrification Line  Expansion

Subdivision V.H. Lot # 123

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

Number of Bedrooms Proposed: 3 360 GPD Lot Size: 28,845 SF

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% Reduction System

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

Subsurface Drainage Field No. of ditches 2 ft. exact length of each ditch 150 ft. width of ditches 3 ft. depth of ditches 22-18 in.

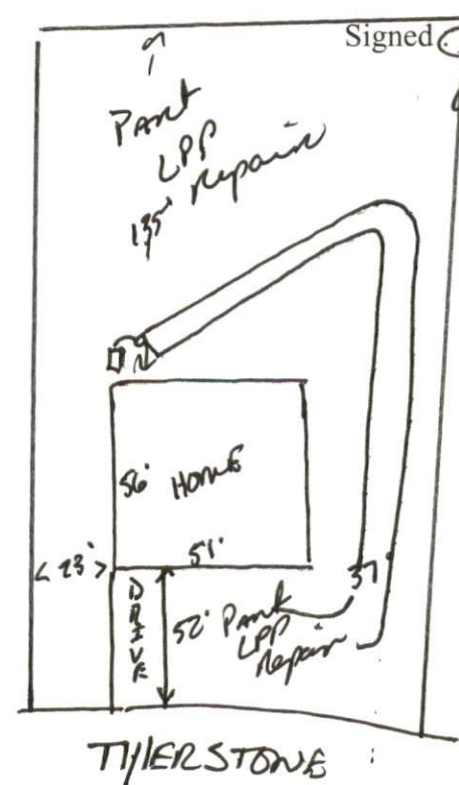
French Drain Required: - Linear feet

Date: 1-20-06

This permit is subject to revocation if site plans or intended use change. PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

Signed: James E. Montant  
Environmental Health Specialist

\* STEPDOWNS WILL BE NEEDED!



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 # 22366. 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.*

Michael Anderson Homes LLC Name 918-868-8294 Telephone #

180 WOODWARD RIDGE DR F.V. N.C. 27526 Address

1443 Property Location SR# Langford Road Name

V.H. Subdivision 123 Lot # 3 3606PD # Bedrooms Proposed 28,845 sq ft Lot Size

**TYPE OF SYSTEM**

New Installation  Repair  Septic Tank  Nitrification Lines

Conventional  Other 25% of system

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 2 Length of lines 150 Ft.

Width of ditches 3 ft. Depth of ditches 22-28 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.

James E. Monahan  
Signature of Authorized Agent for Harnett County

1-20-06  
Date