

HARNETT COUNTY HEALTH DEPARTMENT

HTE# 06-5-13792
06-5-13793

IMPROVEMENT PERMIT 22372

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) Wendy + Trent Moorehead New Installation Septic Tank Repair
 Property Location: SR# 1407 WADE STEPHENSON Nitrification Line Expansion
 Subdivision Fieldstone Farms Lot # 7
 Tax ID# _____ Quadrant # _____
 Number of Bedrooms Proposed: 4 4806PD Lot Size: 4.46

Basement with Plumbing: Garage:
 Water Supply: Well Public Community
 Distance From Well: _____ ft.

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

Type of system: Conventional Other _____

Size of tank: Septic Tank: 1200 gallons Pump Tank: _____ gallons

Subsurface No. of exact length width of depth of
 Drainage Field ditches 5 ft. of each ditch 110 ft. ditches 3 ft. ditches 24" max. in.

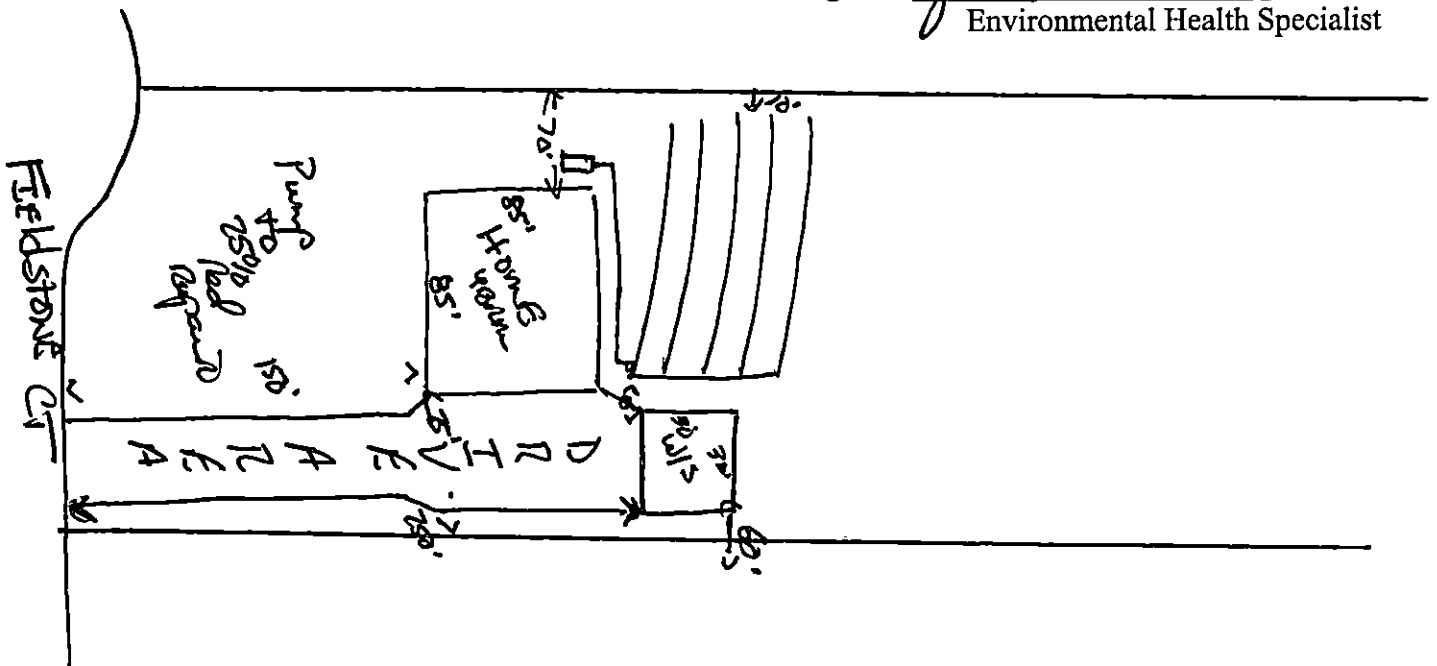
French Drain Required: - Linear feet

Date: 1-30-06

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



06-5-13792
06-5-13283

HARNE 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 # 22372. 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 Wendy Trent Moorehead Telephone # 919-552-9770

Address 117 WOODLAND RIDGE DR FU. N.C. 27526

Property Location SR# 1407 Road Name WADE STEPHENS

Subdivision Fieldstone Falls Lot # 7 # Bedrooms Proposed 4 480 LPA Lot Size 4.46

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other SR

Basement With Plumbing Without Plumbing

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

Septic Tank 1200 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 5 Length of lines 110 Ft.

Width of ditches 3 ft. Depth of ditches 24" 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 of Authorized Agent for Harnett County James E. Manhart Date 1-30-06