

HTE# 06 50013849

# IMPROVEMENT PERMIT 22814

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) OMNI CONSTRUCTION New Installation  Septic Tank  Repair   
Property Location: SR# 2026 BYROS POND RD Nitrification Line  Expansion   
Subdivision BYRD POND ESTATES Lot # 17  
Tax ID# \_\_\_\_\_ Quadrant # \_\_\_\_\_  
Number of Bedrooms Proposed: 3 (360 sqd) Lot Size: .610 ac

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 \_\_\_\_\_

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

Subsurface No. of exact length width of depth of  
Drainage Field ditches 1 ft. of each ditch 180 ft. ditches 3 ft. ditches 36 in.

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

Date: 3/3/06  
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

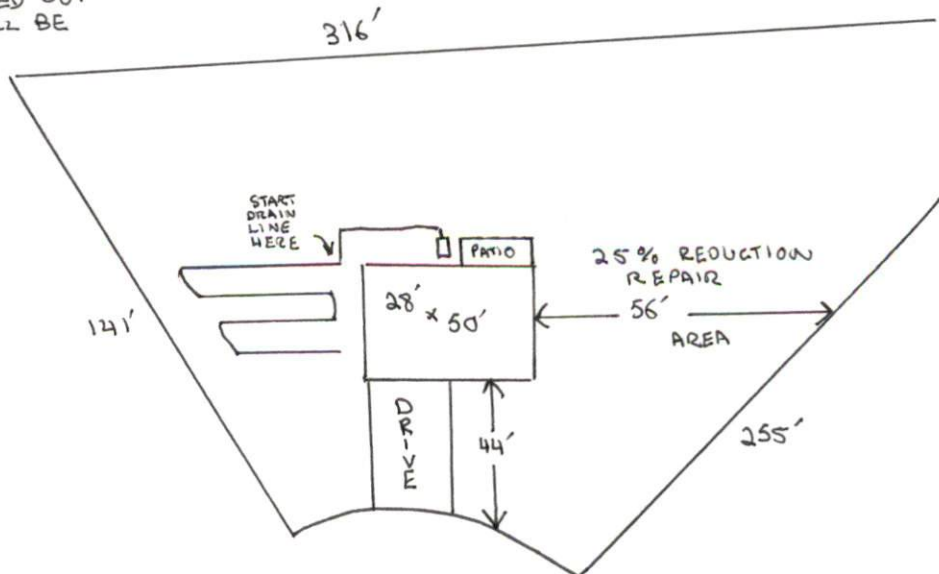
**This permit is subject to revocation if site plans or intended use change.**

Signed: [Signature] RS (OLIVER TOLKSOOF)  
Environmental Health Specialist

\* MAINTAIN ALL SETBACKS;  
STAY OFF WELLS AS FAR  
AS POSSIBLE

\* IF PLUMBING IS SUBBED OUT  
TOO DEEP A PUMP WILL BE  
REQUIRED

\* CALL WITH ANY  
QUESTIONS PRIOR  
TO INSTALLATION



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 # 22814. 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.***

OMNI CONSTRUCTION  
Name \_\_\_\_\_ Telephone # \_\_\_\_\_  
PO Box 1128 FURQUAY VARINA NC 27526  
Address \_\_\_\_\_  
2026 BYROS POND RD  
Property Location SR# \_\_\_\_\_ Road Name \_\_\_\_\_  
BYROS POND ESTATES 17 3 (360 gpd) .610 ac  
Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_ # Bedrooms Proposed \_\_\_\_\_ Lot Size \_\_\_\_\_

**TYPE OF SYSTEM**

New Installation [ ] Repair  Septic Tank  Nitrification Lines  
 Conventional [ ] Other \_\_\_\_\_  
[ ] Basement [ ] With Plumbing [ ] Without Plumbing  
Water Supply: [ ] Well  Public Water Supply Minimum Well Setback: 50 Ft.  
Septic Tank 1000 gal Pump Chamber \_\_\_\_\_ gal

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 1 Length of lines 180 Ft.  
Width of ditches 3 ft. Depth of ditches 36 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] \_\_\_\_\_ 3/2/06  
Signature of Authorized Agent for Harnett County \_\_\_\_\_ Date \_\_\_\_\_