

HTE# 06-5-14087

IMPROVEMENT PERMIT 22384

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) CWW CONTRACTORS New Installation Septic Tank Repair

Property Location: SR# 2028 Harnett Central Nitrification Line Expansion

Subdivision PEAR MEADOW Lot # 23

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 3 3606PD Lot Size: .35

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 25% Red system

Size of tank: Septic Tank: 1060 gallons Pump Tank: _____ gallons

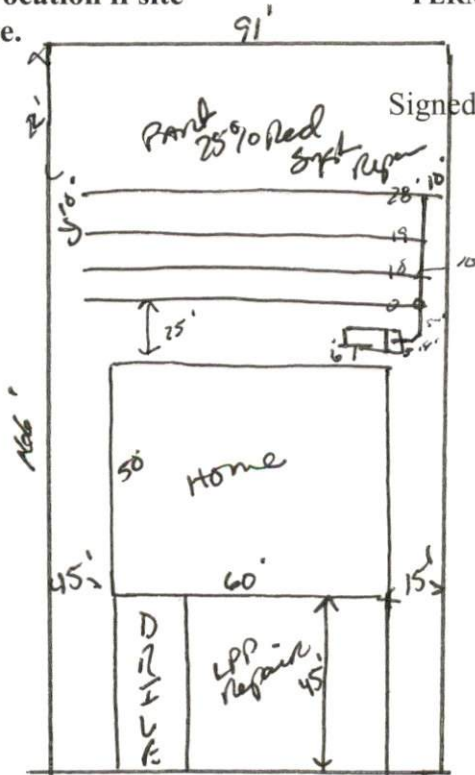
Subsurface Drainage Field No. of ditches 4 ft. exact length of each ditch 70 ft. width of ditches 3 ft. depth of ditches 26" → 18" in.

French Drain Required: 1 Linear feet

Date: 2-24-06

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

PERMIT EXPIRES 5 YEARS FROM ABOVE DATE



Signed: James E. Manhart
Environmental Health Specialist

D'ANGELO CERCHI

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.*

C W W Contractors 919-796-9286
Name Telephone #

172 WENDMORE DR Angier N.C. 27501
Address

2028 Harnett Central RD
Property Location SR# Road Name

Pearl Meadow 23 3 360 GPD .35
Subdivision Lot # # Bedrooms Proposed Lot Size

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other 25% Red Syst

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 4 Length of lines 70 Ft.

Width of ditches 3 ft. Depth of ditches 16-18 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. Merchant
Signature of Authorized Agent for Harnett County

2-24-06
Date