HTE# 06-5-14304

IMPROVEMENT PERMIT 22858

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) STEVE AILEN Constantion New Installation Septic Tank Repair
Property Location: SR# 1452 Truelove RD Nitrification Line Expansion
Subdivision Towathon Radge Lot # 13
Tax ID# Quadrant # Number of Bedrooms Proposed: 3844 Lot Size: 25,000 \$455
Number of Bedrooms Proposed: 3800 Size: 25,000 Size: 25,000 Size:
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% Reduction System
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of Drainage Field ditches of the ditches 32->18 in.
Dramage Field alteries 47 In or each after 750 In alteries 51 In alteries 52 770 In.
French Drain Required:Linear feetDate: 3-28-06
This permit is subject to revocation if site PERMIT EXPIRES 5 YEARS FROM ABOVE DATE plans or intended use change.
Brush 248.95 Signed: James & Marshant ans
Environmental Health Specialist
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MECIDED.
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HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to constr Harnett County Department of Public I authorization shall be valid for a period	Health, Improvement Permit # _ I not to exceed five (5) years fro	. This om the date of issuance.	
This authorization will be invalid if ov	vnership, site plans, or intende	d use change.	
STEVE ALIEN Construction Name 8909 Rawsdell RD RA Address	stergh N.C. 771	603	
/45 ⁻ Z Property Location SR#		d Name	
	7104	25 1000 2 P	
Towathon Realize 13 Subdivision Lot#	# Bedrooms Proposed	Lot Size	
T	VPE OF SYSTEM		
New Installation [] Repair [Septic Tank [Nitrific	ation Lines	
Conventional Other 25%	Reduction Systa		
Basement [] With Plumbing [] Without Plumbing		
Water Supply: [] Well [Public	Water Supply Minimum Well	Setback:Ft.	
Septic Tank gal	Pump Chamber	gal	
<u>NITRIFICATI</u>	ON FIELD SPECIFICAT	TIONS	
Number of fields# of lines	per field Length of	lines /50 Ft.	
Width of ditches ft. Depth of ditches inches			
rench Drain: Linear feet required	Depth of gravel -		
No wastewater system shall be covered of larnett County Health Department has one conditions of the Improvement Perm	determined that the system has be	peen installed according to	
James & MANLAS	fores	3-28-06	
gnature of Authorized Agent for Harnett Coun	ty	Date	