

HTE# 06-5-14381

# IMPROVEMENT PERMIT 22872

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) BELTWEI HOMES INC New Installation  Septic Tank  Repair   
 Property Location: SR# 1429 Chalybente Nitrification Line  Expansion   
 Subdivision DEXTERFIELD Lot # 20  
 Tax ID# \_\_\_\_\_ Quadrant # \_\_\_\_\_  
 Number of Bedrooms Proposed: 3000 360 640 Lot Size: .383

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: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

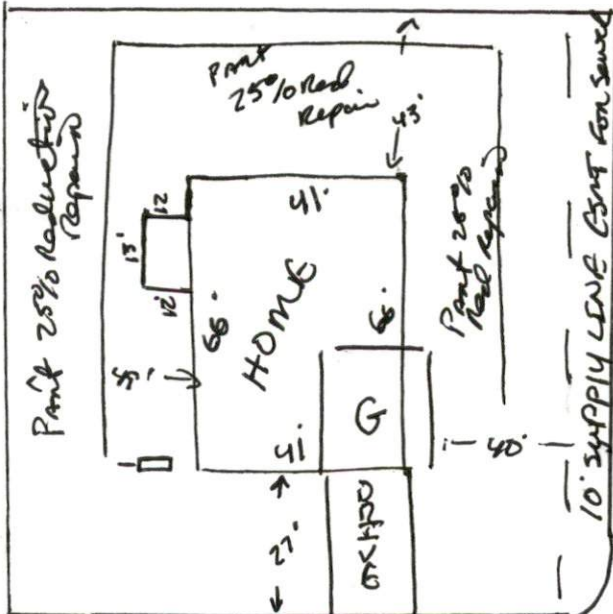
Subsurface No. of exact length width of depth of  
 Drainage Field ditches 1 ft. of each ditch 240 ft. ditches 3 ft. ditches 30-218 in.

French Drain Required: - Linear feet

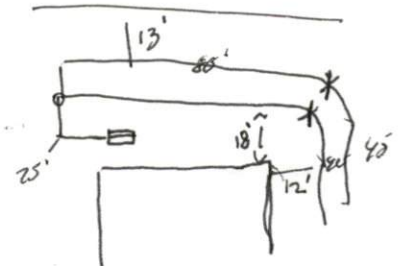
Date: 4-4-06  
 PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

Signed: James E. Markant  
 Environmental Health Specialist



DEXTERFIELD DRIVE



OVERBY CT

# 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 # 22872. 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.*

BEHWEL HOMES INC 919-662-1010  
Name Telephone #

720 Trebon Dr GARNER N.C. 27529  
Address

1429 Chalybeate  
Property Location SR# Road Name

Dexterfield 20 3 BRN 360GPD .383  
Subdivision Lot # # Bedrooms Proposed Lot Size

### TYPE OF SYSTEM

New Installation  Repair  Septic Tank  Nitrification Lines

Conventional  Other 25% Reduction 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 1 Length of lines 240 Ft.

Width of ditches 3 ft. Depth of ditches 30 7/8 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. Marshall  
Signature of Authorized Agent for Harnett County

4-4-06  
Date