

HTE# 06-5-14394

Slop - 14395

# IMPROVEMENT PERMIT 22877

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) Scott + Dawn Guy New Installation  Septic Tank  Repair

Property Location: SR# 1403 Harnett Central Nitrification Line  Expansion

Subdivision \_\_\_\_\_ Lot # 2

Tax ID# \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 3 BRN 360 GPD Lot Size: 6.89 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 3 ft. of each ditch 100 ft. ditches 3 ft. ditches 30-18 in.

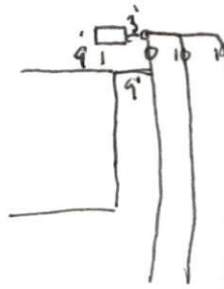
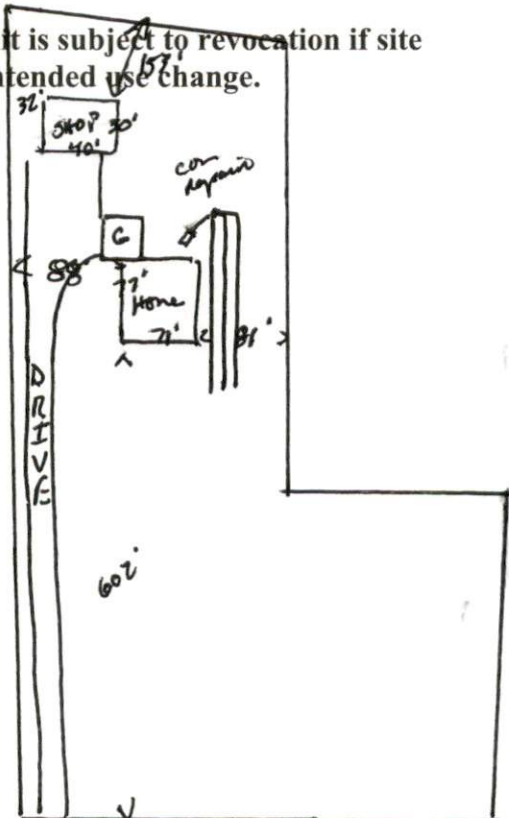
French Drain Required: \_\_\_\_\_ Linear feet

Date: 4-6-06

PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

Signed: James E. Montford  
Environmental Health Specialist



SL1403 Harnett Central RD

#06-5-14394  
14395  
(Shop)

# 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 # 22877. 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.*

SCOTT + DAWN GUY 919-655-6104  
Name Telephone #

P.O. BOX 345 Angier N.C. 27501  
Address

1403 Harnett Central  
Property Location SR# Road Name

Subdivision \_\_\_\_\_ Lot # 2 # Bedrooms Proposed 30m 360 600 Lot Size 6.55

### 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: \_\_\_\_\_ Ft.  
Septic Tank 1000 gal Pump Chamber \_\_\_\_\_ gal

### NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 3 Length of lines 100 Ft.  
Width of ditches 3 ft. Depth of ditches 30-18 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. Markham 4-6-06  
Signature of Authorized Agent for Harnett County Date