

HTE# 06-5-14547

IMPROVEMENT PERMIT 22886

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) Michael Anderson New Installation Septic Tank Repair

Property Location: SR# 1443 CARRIETTE RD Nitrification Line Expansion

Subdivision V.H. Lot # 141

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 3BRN 360GPD Lot Size: .55ACR

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 25% Reduction System

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 2 ft. exact length of each ditch 150 ft. width of ditches 3 ft. depth of ditches 28" in.

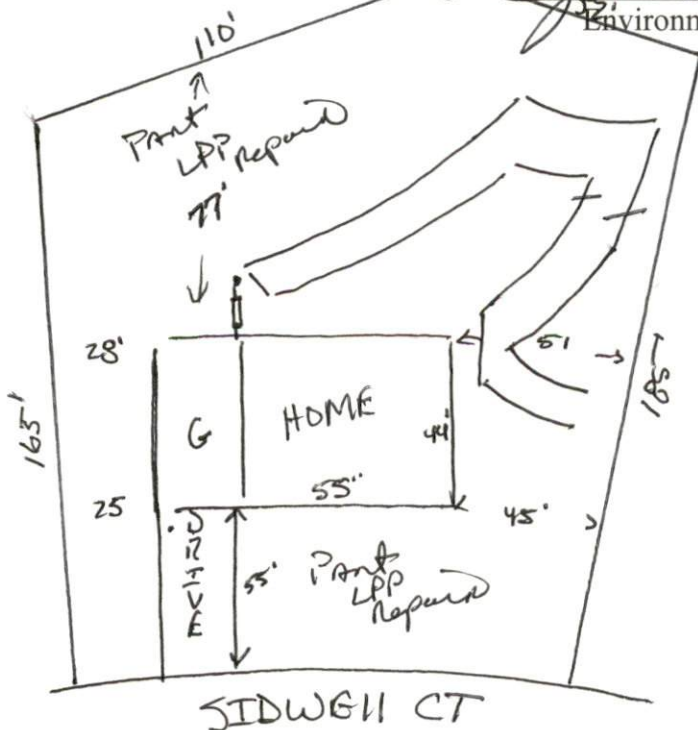
French Drain Required: - Linear feet

Date: 4-20-06

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

PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

Signed: James E. Markantone
Environmental Health Specialist



* STEP DOWNS WITH BB NEEDED.

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 # 22886. 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.***

Michael Anderson Name 919-868-8254 Telephone #

180 WOODLAND RIDGE DR F.V. N.C. 27526 Address

1443 Property Location SR# CATYB Road Name

V.H. Subdivision 141 Lot # 3BR-360GPD # Bedrooms Proposed 1.55 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 2 Length of lines 150 Ft.

Width of ditches 3 ft. Depth of ditches 28 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. Manhart
Signature of Authorized Agent for Harnett County

4-20-06
Date