

HTE# 06-500 14615 RRR

IMPROVEMENT PERMIT

23198

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) Helt Construction New Installation Septic Tank Repair

Property Location: SR# 1125 Nitrification Line Expansion

Subdivision FOREST OAKS Lot # 107

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (48 x 48) 760 gal Lot Size: .68 ac

Basement with Plumbing: Garage: Must Bring In 8 to 12" approved

Water Supply: Well Public Community Cover over 25% Reduction system

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 Pump to ultra shallow 25% Reduction SYSTEM

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

Subsurface No. of exact length width of depth of
Drainage Field ditches 1 ft. of each ditch 300 ft. ditches 3 ft. ditches 12 in.
25% Reduction system

French Drain Required: _____ Linear feet

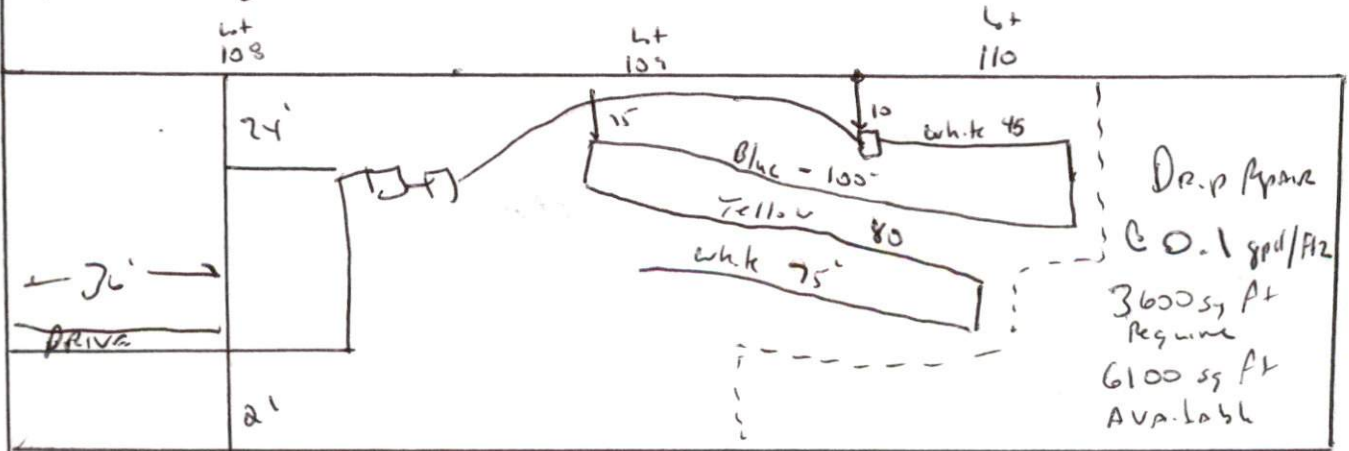
Date: 08-24-06

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

PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

Signed: [Signature]
Environmental Health Specialist

Meet onsite for Final Layout



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 # 23198. 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.***

He H Const.

Name _____ Telephone # _____

Address _____

1125
Property Location SR# _____ Road Name _____

FOREST OAKS 107 3148 x 48 360 sq ft .68 ac
Subdivision Lot # # Bedrooms Proposed Lot Size

TYPE OF SYSTEM

- New Installation Repair Septic Tank Nitrification Lines
 Conventional Other Pump to 25% Reduction SYSTEM
 Basement With Plumbing Without Plumbing

Water Supply: Well Public Water Supply Minimum Well Setback: _____ Ft.

Septic Tank 1000 gal Pump Chamber 1000 gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 300 Ft.
 Width of ditches 3 ft. Depth of ditches 12 in inches OF 25% Reduction SYSTEM

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.

Joe Waters
Signature of Authorized Agent for Harnett County

08-24-06

Date