

IMPROVEMENT PERMIT

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) STEPHANSON Builders Inc

New Installation Septic Tank

Property Location: SR# 1429 CHALMERS RD

Repairs Nitrification Line

Subdivision DGUTBENFIELD Lot # 11

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 BR 3603 PD Lot Size: .345

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

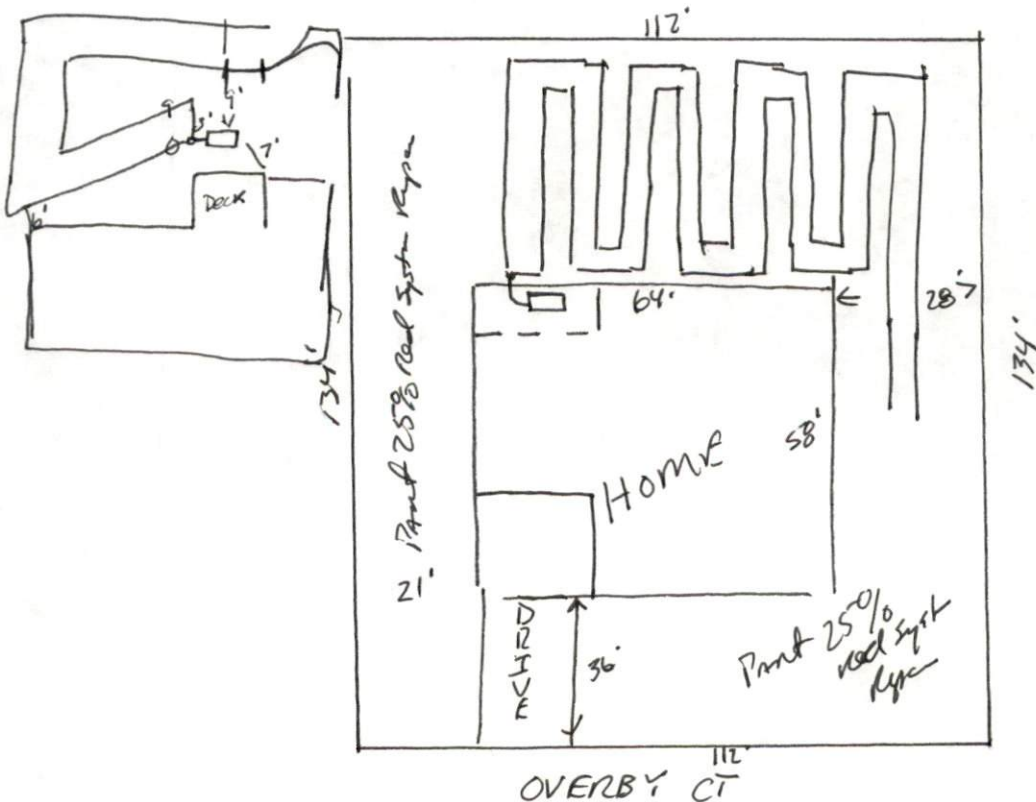
Subsurface Drainage Field No. of ditches 2 exact length of each ditch 120 ft. width of ditches 3 ft. depth of ditches 30-218 in.

French Drain Required: _____ Linear feet

Date: 5-11-06

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

Signed: James E. Markham
Environmental Health Specialist



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 # 14306. 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.***

STEPHENSON BUILDERS INC 715-635-2862
Name Telephone #

1187 N RALEIGH ST Angier N.C. 27501
Address

1429 Charlotte
Property Location SR# Road Name

DARTSFIELD 11 3BR 3606PD .345
Subdivision Lot # # Bedrooms Proposed Lot Size

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other 25% Reduction Syst

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 180 Ft.

Width of ditches 3 ft. Depth of ditches 30-38 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 M. ...
Signature of Authorized Agent for Harnett County

5-11-06
Date