

HTE# 06-50014769

IMPROVEMENT PERMIT 22969

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) MJC CONSTRUCTION New Installation Septic Tank Repair
Property Location: SR# 060 US421 Nitrification Line Expansion
Subdivision MAMIE BELL RIDGE Lot # 42
Tax ID# _____ Quadrant # _____
Number of Bedrooms Proposed : 3 (360 gpd) Lot Size: .56 ac

Basement with Plumbing: Garage:
Water Supply: Well Public Community
Distance From Well: 100 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 25% REDUCTION SYSTEM

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

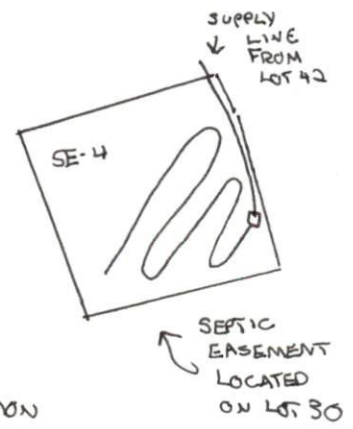
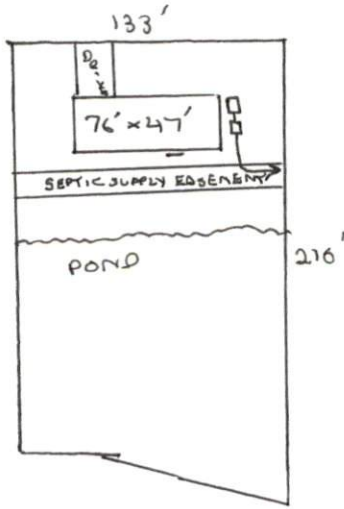
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 150 ft. width of ditches 3 ft. depth of ditches 22 in.

French Drain Required: _____ Linear feet

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

Date: 5/16/06
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

Signed:  RS (OLIVER TOLKSKOV)
Environmental Health Specialist



- *SEE ATTACHED MAP FOR EXACT EASEMENT LOCATION
- *MAINTAIN ALL SETBACKS
- *CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION

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 # 22969. 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.*

MJC CONSTRUCTION 843-5677
Name Telephone #

2830 SPRINGHILL CTR RD LILLINGTON NC 27546
Address

010 US421
Property Location SR# Road Name

MAMIE BELL RIDGE 42 3 (360 gal) .56 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: 100 Ft.

Septic Tank 1000 gal Pump Chamber 1000 gal

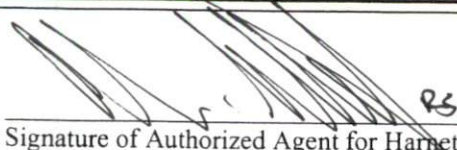
NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 150 Ft.

Width of ditches 3 ft. Depth of ditches 22 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.

 RS
Signature of Authorized Agent for Harnett County

5/16/06
Date