

HTE# 06-50014925R

HARNETT COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT 23072

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) Danny Norris (Bridge Builders) New Installation Septic Tank Repair

Property Location: SR# 1100 Nitrification Line Expansion

Subdivision Yorkshire Plantation Lot # 165

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (54x35) 760 gpd Lot Size: .55 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 Pump to 25% Reduction System

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

Subsurface Drainage Field No. of ditches 1 ft. exact length of each ditch 180 ft. width of ditches 3 ft. depth of ditches 18.24 in.

French Drain Required: _____ Linear feet of 25% Reduction south

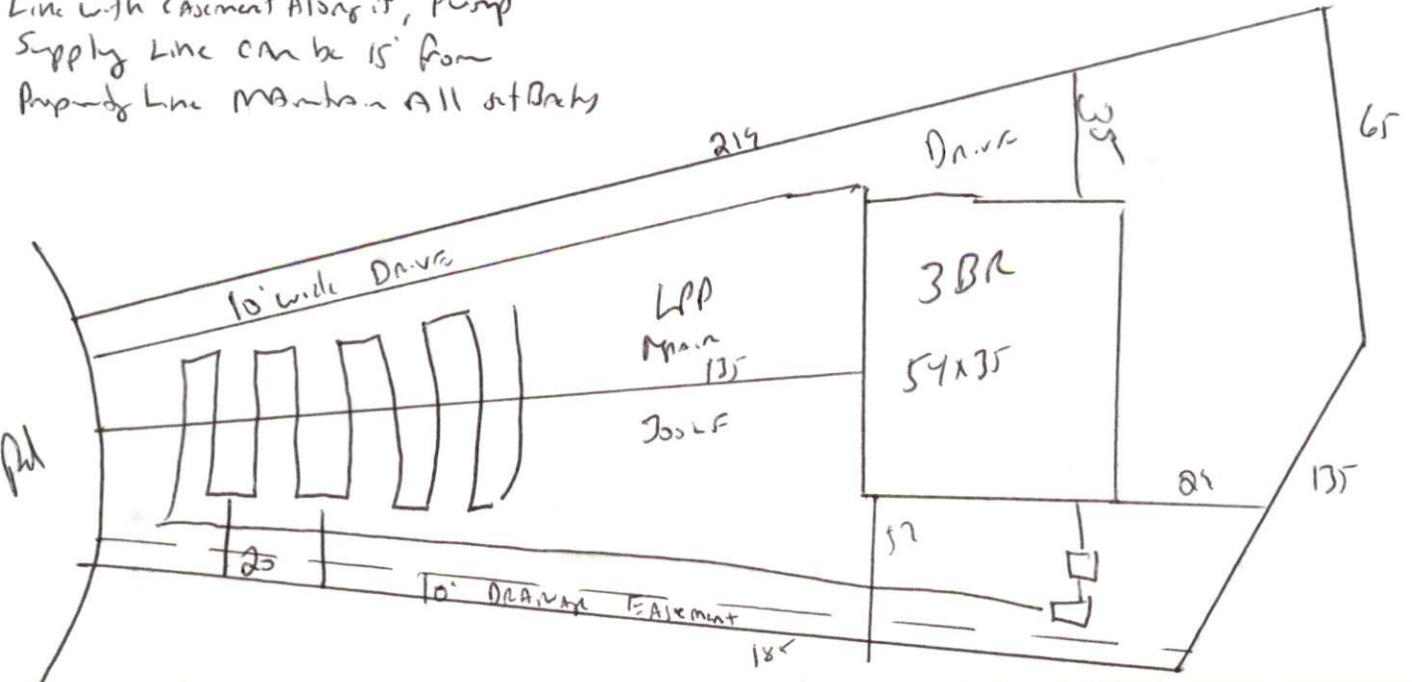
Date: 06-20-06

PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

*Met onsite for Final Layout
Keep drain lines 25' from property line with easement along it, Pump supply line can be 15' from property line maintain all at back*

Signed: Jac Weber
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 # 23072. 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.*

Darryl Morris (Briarwood Builders)
Name _____ Telephone # _____

Address _____

1108

Property Location SR#

Road Name

Yockshoe Plantation

165

3(54x35) 362 sq ft

55 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: 50 Ft.

Septic Tank 1000 gal Pump Chamber 1000 gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 180 Ft.

Width of ditches 3 ft. Depth of ditches 18 1/4 inches

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.

[Signature]
Signature of Authorized Agent for Harnett County

06-20-06
Date