

IMPROVEMENT PERMIT 23036

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) Kenneth Cummings New Installation Septic Tank Repair

Property Location: SR# 1125 Nitrification Line Expansion

Subdivision Woodham Phase 4 Lot # 141

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (56x28) 260 sq ft Lot Size: .40 AC

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: _____ 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 Conventional

Size of tank: Septic Tank: 1200 gallons Pump Tank: 1200 gallons

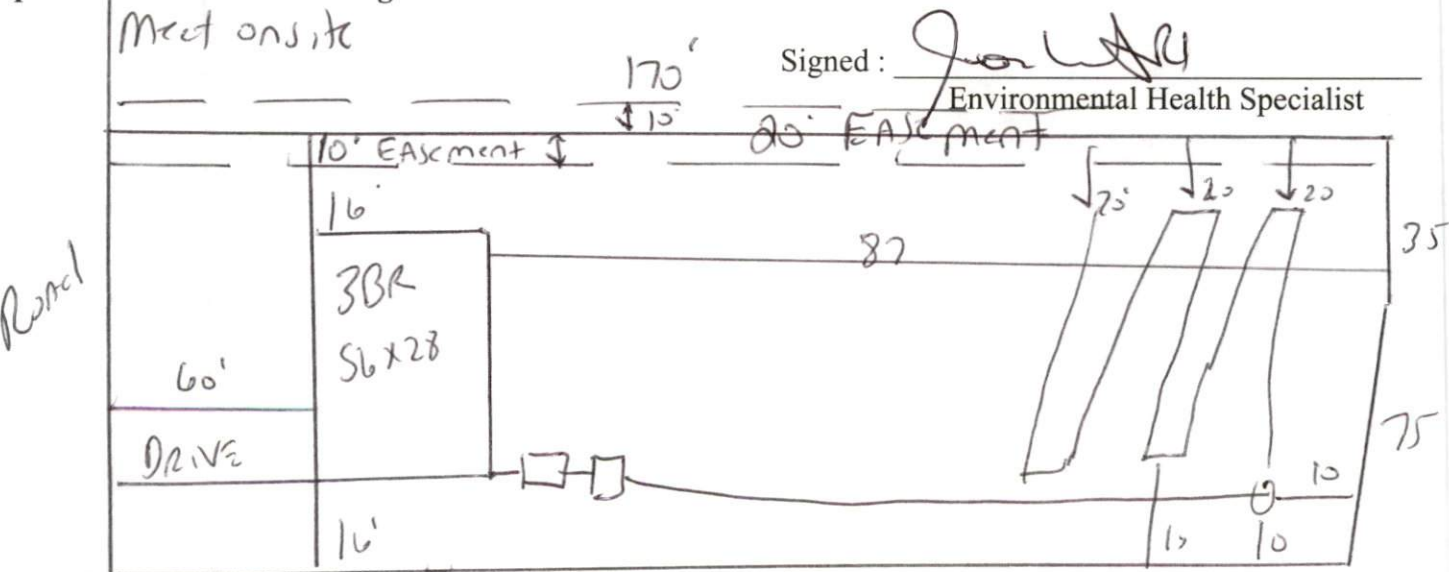
Subsurface Drainage Field No. of ditches 1 ft. exact length of each ditch 200 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain Required: _____ Linear feet

Date: 06-06-06
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

Signed: [Signature]
Environmental Health Specialist



Meet onsite
STUB out Plumbing shallow ~~near~~. And Pump may not be required
Keep drain field 20' from Property Line with DRAINAGE EASEMENT along it
MAINTAIN ALL SET BACKS

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 # 23036. 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.*

Name Kenneth Cummings Telephone # _____

Address _____

Property Location SR# 1125

Subdivision Woodshire Phase 4 Lot # 141 # Bedrooms Proposed 3(56x28) 360 sqd Road Name YDac Lot Size _____

TYPE OF SYSTEM

- New Installation [] Repair Septic Tank Nitrification Lines
- [] Conventional Other Pump To Conventional
- [] 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 200 Ft.

Width of ditches 3 ft. Depth of ditches 18.24 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.

Signature of Authorized Agent for Harnett County Joe West RS

Date 06-06-06