

HTE 06-50015103

**IMPROVEMENT PERMIT**

**21788**

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) Katrina Stafford  New Installation  Septic Tank  
 Property Location: SR# 1224 McNeil Rd  Repairs  Nitrification Line

Subdivision \_\_\_\_\_ Lot # 2

Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 3 (3600 gpd) Lot Size: 1.14 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 25% Reduction

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

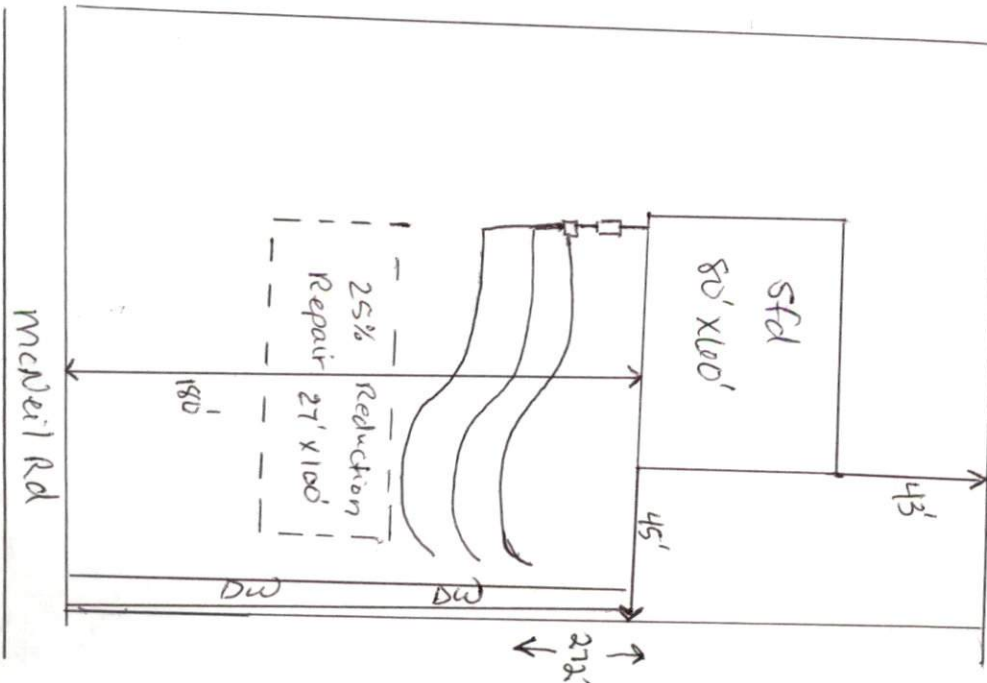
Subsurface Drainage Field No. of exact length width of depth of  
 Ditches 3 of each ditch 100 ft. ditches 3 ft. ditches 12 in.

French Drain Required: \_\_\_\_\_ Linear feet

Date: 6-22-06

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

Signed: Jamie Tworington RS  
 Environmental Health Specialist  
 (OLIVER TOLKSDORF) RS



- \* Need 6" of cover on system.
- \* Maintain all required setbacks
- \* Run lines on contour.

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 # 21788. 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.***

Katrina Stafford Name 499-4345 Telephone #

2409 McNeil Rd Broadway NC 27505 Address

1224 Property Location SR# McNeil Rd Road Name

Subdivision 2 Lot # 3 (3600 gpd) # Bedrooms Proposed 1.14 ac Lot Size

**TYPE OF SYSTEM**

New Installation  Repair  Septic Tank  Nitrification Lines

Conventional  Other 25% Reduction

Basement  With Plumbing  Without Plumbing

Water Supply:  Well  Public Water Supply Minimum Well Setback: 100 Ft.

Septic Tank 1000 gal Pump Chamber \_\_\_\_\_ gal

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 3 Length of lines 100 Ft.

Width of ditches 3 ft. Depth of ditches 12 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.

Jamie Twilington RS Signature of Authorized Agent for Harnett County RS 6-22-06 Date