

HTE# 06-5-119

IMPROVEMENT PERMIT 22582

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) Chris Praltis New Installation Septic Tank Repair

Property Location: SR# 1423 Tyler Dewar Nitrification Line Expansion

Subdivision Dewar Lot # 5

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 2 (240 yd) Lot Size: 10 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 _____

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

Subsurface No. of exact length width of depth of
Drainage Field ditches 3 of each ditch 90 ft. ditches 3 ft. ditches 18 in.

French Drain Required: _____ Linear feet

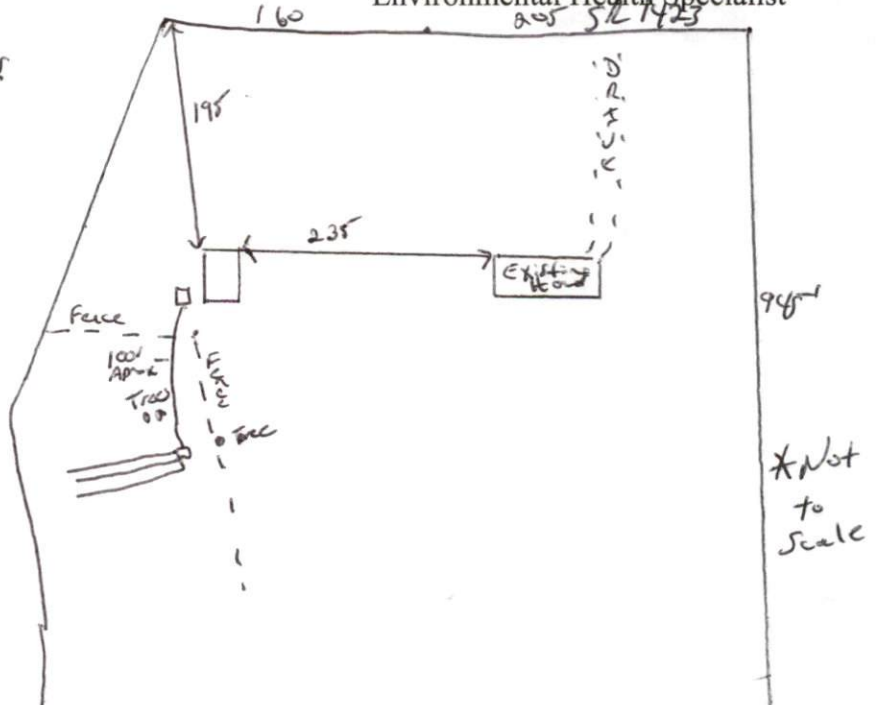
Date: 7/5/2006

PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

Signed: Bryan McLean R.S.
Environmental Health Specialist

* Maintain all set backs
* Run ditches on contour
+ NO DEEPER than 18 inches



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 # 22582. 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.*

Chris Praltis Name 919 577 0425 Telephone #

495 Tyler Dewar Ln. Fuquay Varina, N.C. 27526 Address

1423 Property Location SR# Tyler Dewar Road Name

Dewar Subdivision 5 Lot # 2 (240 sq ft) # Bedrooms Proposed 1040 Lot Size

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other _____

Basement With Plumbing Without Plumbing

Water Supply: Well Public Water Supply Minimum Well Setback: 50 Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 3 Length of lines 90 Ft.

Width of ditches 3 ft. Depth of ditches 18 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.

Brian McSwain, P.E.
Signature of Authorized Agent for Harnett County

7/5/2006
Date