

HTE# 06-5-15188

IMPROVEMENT PERMIT 23158

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) RBC Homes Inc New Installation Septic Tank Repair
 Property Location: SR# BYRO POND RD Nitrification Line Expansion
 Subdivision BYROS POND EST. Lot # 2
 Tax ID# _____ Quadrant # _____
 Number of Bedrooms Proposed: 3 (360 gpd) Lot Size: .501 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 25% REDUCTION SYSTEM


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

Subsurface No. of exact length width of depth of
 Drainage Field ditches 4 of each ditch 60 ft. ditches 3 ft. ditches 18 in.

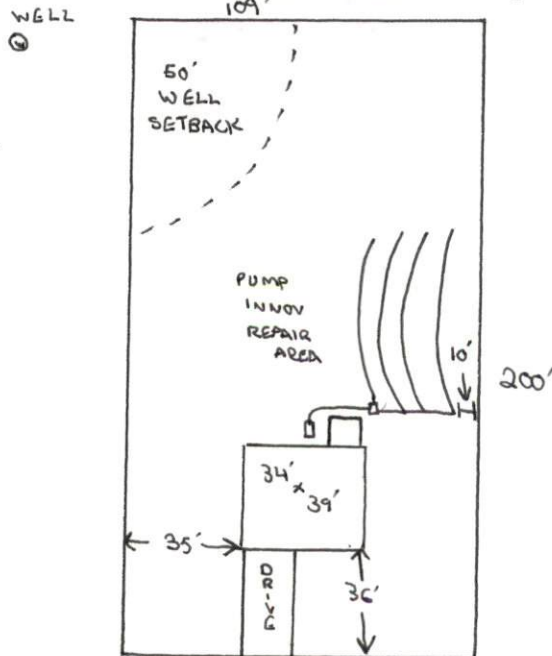
French Drain Required: _____ Linear feet

Date: 7/20/06
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

Signed:  RS (OLIVER TOLKSPORG)
 Environmental Health Specialist

*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 # 23158. 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.***

RBC Homes Inc 423-3555
Name Telephone #

PO Box 755 Fayetteville NC 28302
Address

Byres Pond Est. Byres Pond Rd
Property Location SR# Road Name

Byres Pond Est. 2 3 (360 gpd) .50 lac
Subdivision Lot # # Bedrooms Proposed Lot Size

TYPE OF SYSTEM

New Installation [] Repair Septic Tank Nitrification Lines

[] Conventional Other 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 _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 4 Length of lines 60 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.

[Signature]
Signature of Authorized Agent for Harnett County

7/20/06
Date