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HARNETT COUNTY HEALTH DEPARTMENT

HTE# 06-5-~~XXXXXX~~

# IMPROVEMENT PERMIT 23163

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# 2026 BYRD POND RD Nitrification Line  Expansion

Subdivision BYRD POND ESTATES Lot # 8

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

Number of Bedrooms Proposed: 3 (360 gpd) Lot Size: .82 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 SYSTEM

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

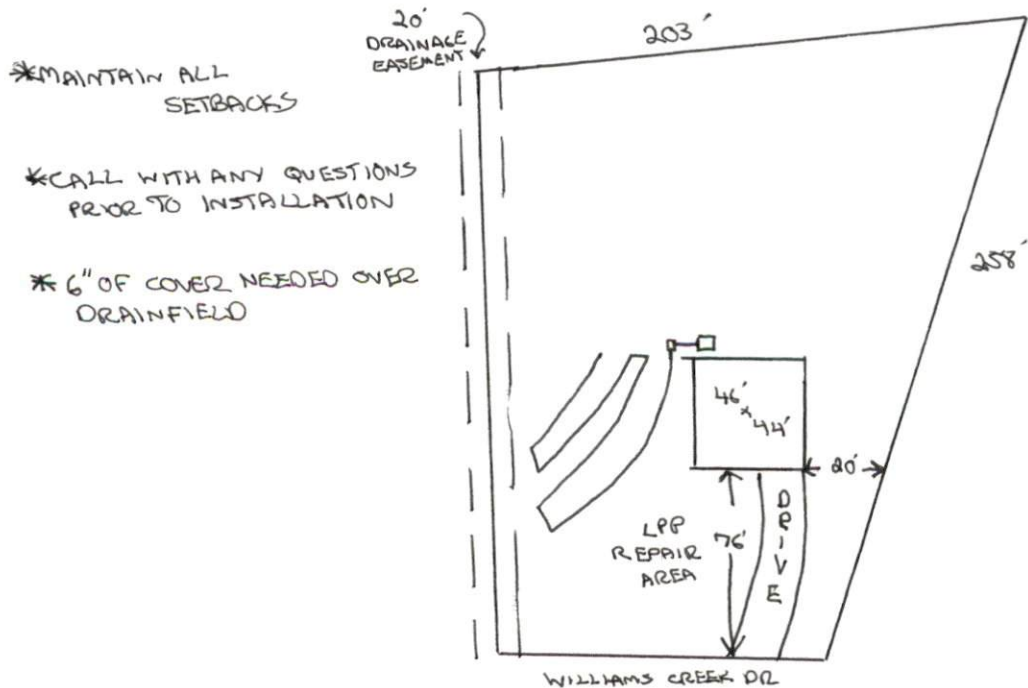
Subsurface No. of exact length width of depth of  
Drainage Field ditches 1 of each ditch 260 ft. ditches 3 ft. ditches 16 in.

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

Date: 7/26/06  
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

Signed: [Signature] RS (OLIVER TOLKSON)  
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 # 23163. 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 Name 423-3555 Telephone #

PO Box 755 FAYETTEVILLE NC 28302 Address

2026 Property Location SR# BYRD POND RD Road Name

BYRD POND EST. Subdivision 8 Lot # 3 (360 gal) # Bedrooms Proposed .82 AC 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: 106 Ft.

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

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 1 Length of lines 260 Ft.

Width of ditches 3 ft. Depth of ditches 16 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] RS  
Signature of Authorized Agent for Harnett County

7/26/06  
Date