

HTE# 06-5-15365

IMPROVEMENT PERMIT 23112

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) BRIAN JOHNSON Builders Inc New Installation Septic Tank Repair

Property Location: SR# 1450 BALL RD Nitrification Line Expansion

Subdivision Hidden Valley Lot # 4

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 3 BRN 360 GPD Lot Size: 1.01 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 ft. of each ditch 133 ft. ditches 3 ft. ditches 24" in.

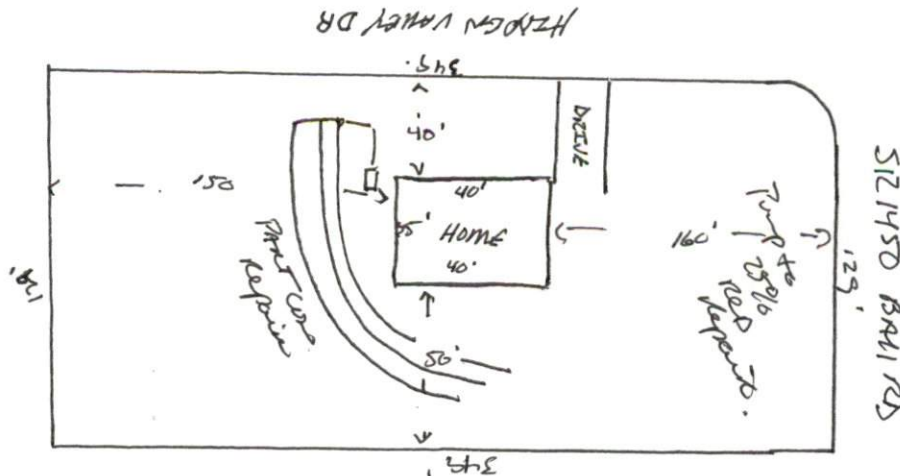
French Drain Required: - Linear feet

Date: 7-25-06

PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

Signed James E. Markert
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 # 23112. 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.***

Brian Johnson Builders Inc 639-3714
Name Telephone #

635 CHESTNUT RD Anglen N.C. 27501
Address

1450 Ball
Property Location SR# Road Name

HEDGEMAN 4 3BR 360GPD 1.00Acre
Subdivision Lot # # Bedrooms Proposed Lot Size

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other CON

Basement With Plumbing Without Plumbing

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

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 3 Length of lines 133 Ft.

Width of ditches 3 ft. Depth of ditches 24" deep 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.

James E. Markham
Signature of Authorized Agent for Harnett County

7-26-06
Date