

HARNETT COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT

21799

HTE 06-50015398

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) Danny Norris  New Installation  Septic Tank  
Property Location: SR# Hwy 27  Repairs  Nitrification Line

Subdivision Laurel Valley Lot # 1

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

Number of Bedrooms Proposed: 3 (3600 gpd) Lot Size: .34 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 \_\_\_\_\_

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

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 175 ft. width of ditches 3 ft. depth of ditches 18-24 in.

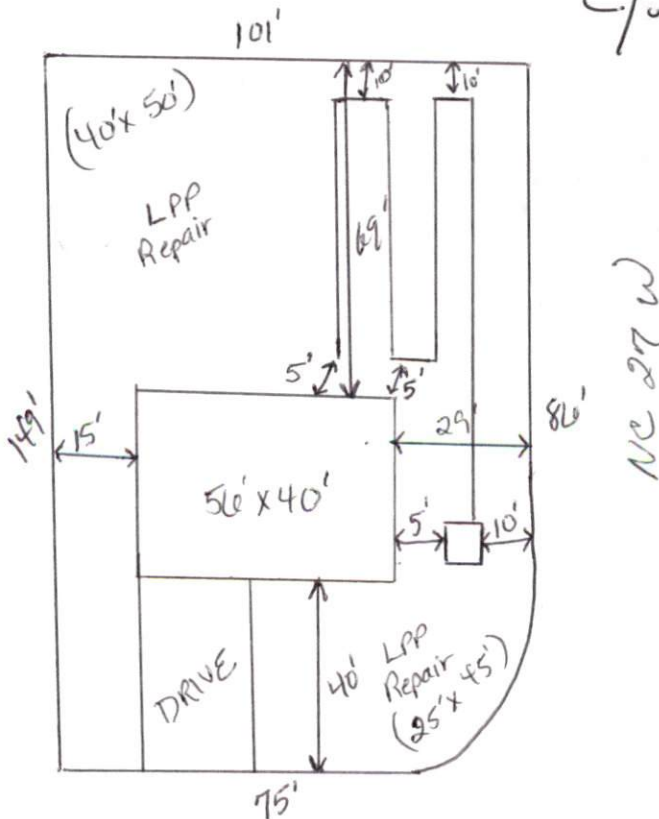
French Drain Required: \_\_\_\_\_ Linear feet

Date: 8-18-06

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

Signed: Jamie Tworlington, RS  
Environmental Health Specialist

*(Handwritten signature)*



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 # \_\_\_\_\_ . 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.***

Name Danny Norris Telephone # (910) 892-4345

Address P.O. Box 727 Dunn, NC 28335

Property Location SR# 27 Road Name Hwy 27

Subdivision Appleton Way Lot # 1 # Bedrooms Proposed 3 (360 sqd) Lot Size .34 ac

**TYPE OF SYSTEM**

New Installation [ ] Repair [input checked="" type="checkbox"/> Septic Tank [input checked="" type="checkbox"/> Nitrification Lines

Conventional [ ] Other \_\_\_\_\_

[ ] Basement [ ] With Plumbing [ ] Without Plumbing

Water Supply: [ ] Well [input checked="" type="checkbox"/> 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 1 Length of lines 175 Ft.

Width of ditches 3 ft. Depth of ditches 18-24 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 of Authorized Agent for Harnett County Jamie Turlington, RS

Date 8/18/06

Date