

01-5-1681

# IMPROVEMENT PERMIT

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) JEFF BENNETT  New Installation  Septic Tank  
Property Location: SR# 1415  Repairs  Nitrification Line

Subdivision HECTORS CREEK Lot # 21

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

Number of Bedrooms Proposed: 3 Lot Size: 2.245 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 POLYSTYRENE AGGREGATE TRENCH

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

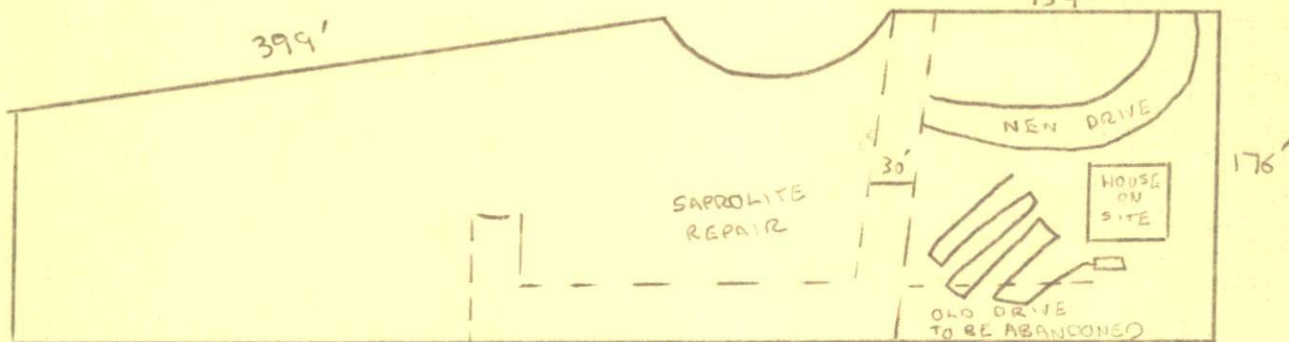
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 300 ft. width of ditches 3 ft. depth of ditches 20 in. ON DOWNHILL SIDE OF TRENCH

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

Date: 2/14/02

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

Signed: [Signature]  
Environmental Health Specialist



DRAWING NTS

\* MAINTAIN ALL SETBACKS

\* RUN LINES ON CONTOUR

25 \* SYSTEM TO BE INSTALLED ACCORDING TO EXISTING FLAGS used

\* NEW DRIVE TO BE INSTALLED PRIOR TO SYSTEM INSTALLATION. NEEDS TO BE VERIFIED BY E. H. REPRESENTATIVE

\* CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION

HARNETT COUNTY HEALTH DEPARTMENT  
AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 18961. 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.

JEFF BENNETT 919-422-6994  
Name Telephone #  
8109 STILLBREEZE DR. FUGUAY-VARINA NC 27526  
Address  
1415  
Property Location SR# Road Name  
HECTORS CREEK 21 3 2.245 AC  
Subdivision Lot # # Bedrooms Proposed Lot size

**TYPE OF SYSTEM**

New Installation  Repair  Septic Tank  Nitrification Lines  
 Conventional Other POLYSTYRENE AGGREGATE TRENCH  
 Basement  With Plumbing  Without Plumbing

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

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 1 Length of lines 300 Ft.

Width of ditches 3 ft. Depth of ditches 20 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] 2/14/02  
Signature of Authorized Agent for Harnett County Date