

1-5-2472

# 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 Huber

New Installation     Septic Tank

Property Location: SR# 401 N

Repairs     Nitrification Line

Subdivision Woodview Lot # 20

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

Number of Bedrooms Proposed: 3 Lot Size: 59 Ac

Basement with Plumbing:  Garage:

Water Supply:  Well     Public     Community

Distance From Well: 50 min 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 4 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 18-20 in.

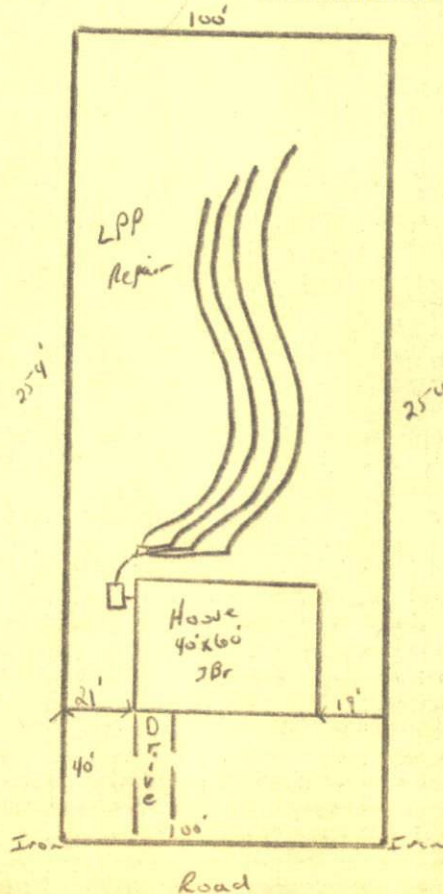
French Drain Required: \_\_\_\_\_ Linear feet

Date: 7/17/2001

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

Signed: Bryan McSwain P.S.  
Environmental Health Specialist

\* Maintain all setbacks  
\* Run ditches on contour + NO  
DEEPER than 20 inches



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 # 18000. 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.

Owner or Authorized Agent \_\_\_\_\_

Name: Jeff Huber Telephone # 919-639-7839

Address: P.O. Box 2105 Killington, N.C. 27546

Property Location: SR # 401 Road Name \_\_\_\_\_

New Installation \_\_\_\_\_ Repair  Septic Tank  Nitrification Lines

Subdivision Woodview Lot # 20

Number of Bedrooms Proposed: 3 Lot size: .59 Ac

Basement \_\_\_\_\_ With Plumbing \_\_\_\_\_ Without Plumbing \_\_\_\_\_

Water Supply: Well \_\_\_\_\_ Public  Minimum Well Setback: 50 ft.

Type of System: Conventional  Other \_\_\_\_\_

Tank Volume: Septic Tank 1000 gallons Pump Chamber \_\_\_\_\_ gallons

**Nitrification Field Specifications**

Number of fields 1 Number of Lines per Field 4 Length of lines 75 ft.

Width of ditches 3 ft. Depth of ditches 18-20 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.

Authorized Agent for Harnett County Health Department

Name: Dwight McSwain R.S. Date: 7/17/2001

(Revised 2/96)CNSTRCT.WPD