

## 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) COREY L KOONCE☒ New Installation☒ Septic TankProperty Location: SR# 1533 LIVE OAK☐ Repairs☒ Nitrification LineSubdivision GREENTREE Lot # 6

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

Number of Bedrooms Proposed: 3 Lot Size: 1.922Basement with Plumbing: ☐ Garage: ☐Water Supply: ☐ Well ☒ Public ☐ CommunityDistance From Well: 50' ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

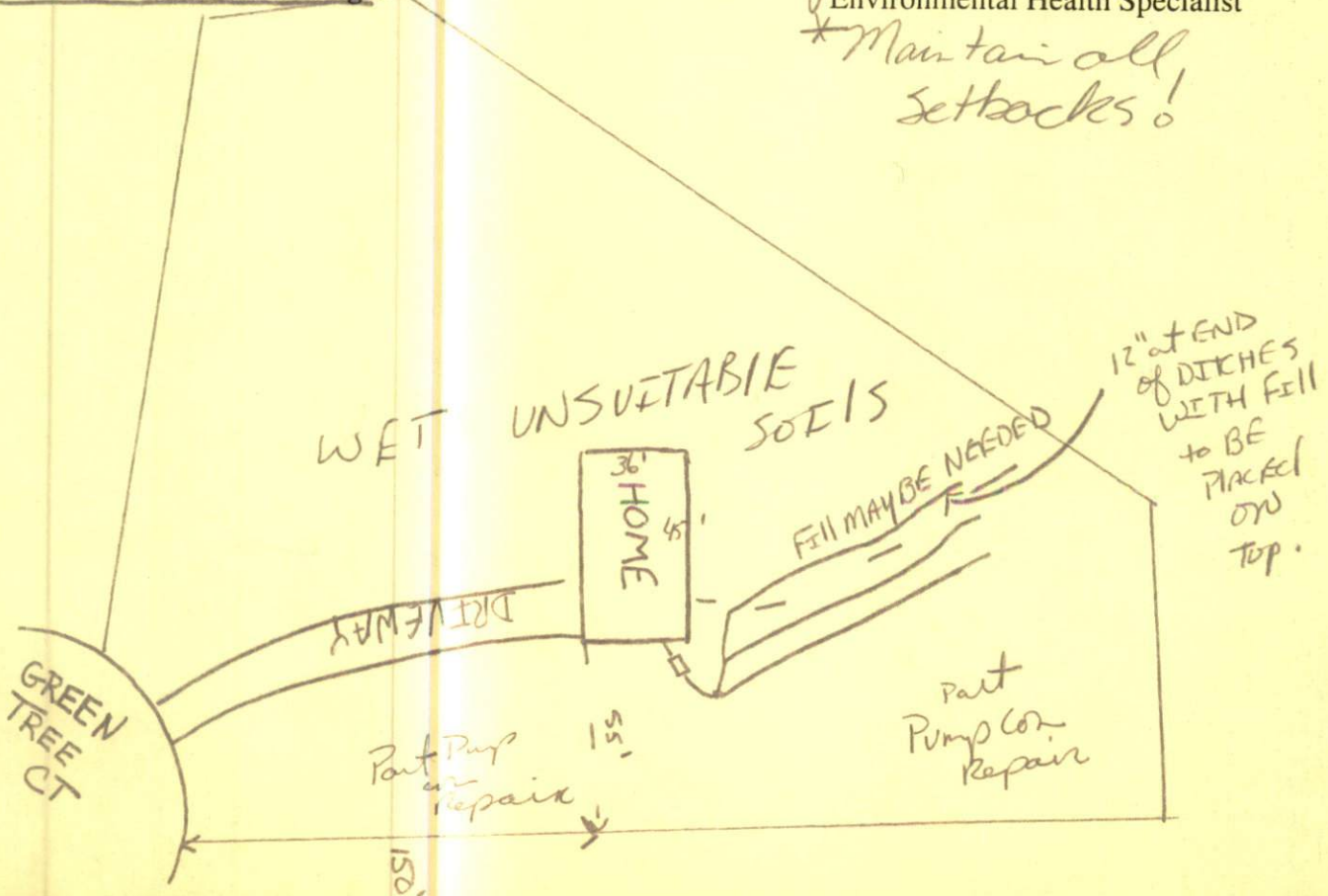
Type of system: ☒ Conventional ☐ Other \_\_\_\_\_Size of tank: Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallonsSubsurface No. of exact length width of depth of  
Drainage Field ditches 3 of each ditch 115 ft. ditches 3 ft. ditches 18-12 in.French Drain Required: — Linear feetDate: 11-7-01

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

Signed: James E. Manday

Environmental Health Specialist

\*Maintain all  
setbacks!



01-5-3282

# ARNETT 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 # 18614. 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 COREY L KOONCE Telephone # 919-266-9895  
Address 1105 Silvershire Way Knightdale N.C. 27545  
Property Location SR# 1533 Road Name LIVE OAK  
Subdivision Greentree Lot # 6 # Bedrooms Proposed 3 Lot size 1.972

## TYPE OF SYSTEM

☒ New Installation ☐ Repair ☒ Septic Tank ☒ Nitrification Lines  
☒ Conventional Other \_\_\_\_\_ ☐ Basement ☐ With Plumbing ☐ Without Plumbing  
Water Supply: ☐ Well ☒ Public - Minimum Well Setback: 50' Ft.

## NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 3 Length of lines 115 Ft.  
Width of ditches 3 ft. Depth of ditches 18-22 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

11-7-01  
Date