

HTE 01-5-3336R

# IMPROVEMENT PERMIT

20358

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) Anthony & Rita D'Arcangelo  New Installation  Septic Tank  
Property Location: SR# 1270  Repairs  Nitrification Line

Subdivision Turkey Trot Lot # 8

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

Number of Bedrooms Proposed: 3 (51 x 53) Lot Size: 10.01 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 Pump to conventional

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

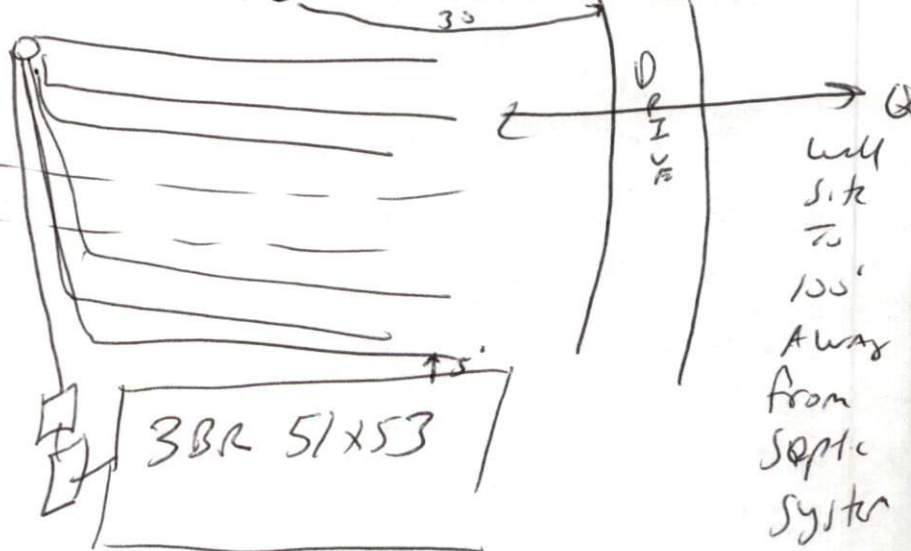
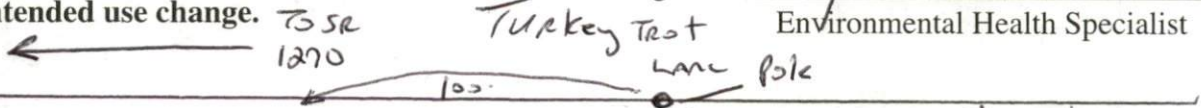
Subsurface Drainage Field No. of ditches 6 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18 in. <sup>max</sup>

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

Date: 10-17-03

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

Signed: Jen W. [Signature]  
Environmental Health Specialist



See Original Permit  
Meet date Before Installing  
18" max Ditch Depth  
Final layout may change  
Do not Drive or Park on Septic System

Well Site to 100' Away from Septic System

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 # 20358. 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.

Anthony J. R. DeCangelis  
Name \_\_\_\_\_ Telephone# \_\_\_\_\_

Address  
1270

Property Location SR# \_\_\_\_\_ Road Name \_\_\_\_\_  
Turkey Foot Acres 8 3(51x53) 10.01 ac  
Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_ # Bedrooms Proposed \_\_\_\_\_ Lot Size \_\_\_\_\_

**TYPE OF SYSTEM**

New Installation  Repair  Septic Tank  Nitrification Lines  
 Conventional  Other Prop to Conv.  
 Basement  With Plumbing  Without Plumbing

Water Supply:  Well  Public Water Supply Minimum Well Setback: 100 Ft.

Septic Tank 1000 gal Pump Chamber 1000 gal

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 6 Length of lines 100 Ft.

Width of ditches 3 ft. Depth of ditches 18 in 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.

Joe Wells  
Signature of Authorized Agent for Harnett County of Harnett

10-17-03  
Date