

01-5-3494

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) Lea Anderson New Installation Septic Tank
Property Location: SR# 1412 Christian Light Repairs Nitrification Line

Subdivision _____ Lot # _____

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 4 Lot Size: 13.19 Ac

Basement with Plumbing: Bm 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 Pump to Conventional ^{Bm}

Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 ^{Bm} gallons

Subsurface Drainage Field No. of ditches 4 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18 in. MAH

French Drain Required: _____ Linear feet

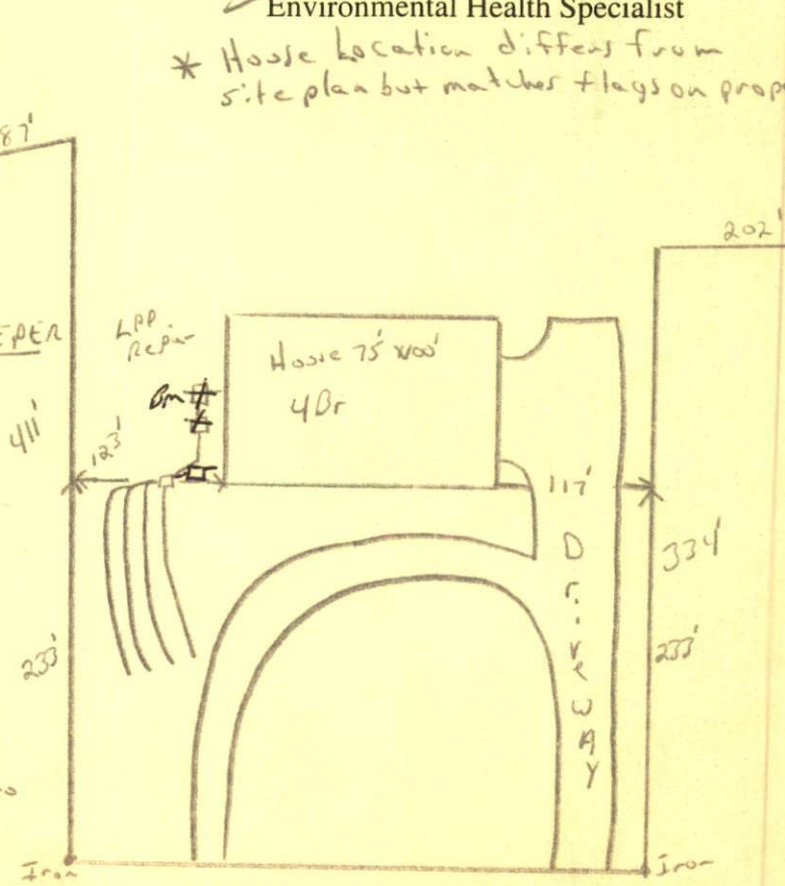
Date: 12/7/2001

Signed: Bryan McSwain P.S.
Environmental Health Specialist

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

* House location differs from site plan but matches flags on property

- * Maintain all setbacks
- * Tanks should be 5 ft. away from house
- * D-Box to be 47 ft. from corner of house
- * Run ditches on contour & NO DEEPER than 18 inches
- * Contractor to meet on-site prior to installing 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 # 18045. 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.

Leon Anderson 919-552-4158
Name Telephone #
6212 Rawls Church Rd. Fuquay Varina NC 27526
Address
1412 Christian Light
Property Location SR# Road Name
4 13.19 AC
Subdivision Lot # # Bedrooms Proposed Lot size

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other Pump to Conventional 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 4 Length of lines 100 Ft.

Width of ditches 3 ft. Depth of ditches 18 inches MAX

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.

Bryan McLean R.S.
Signature of Authorized Agent for Harnett County

12/7/2001
Date