

02-5-3891

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) R.L. Properties New Installation Septic Tank
Property Location: SR# 1532 Langdon Rd. Repairs Nitrification Line

Subdivision Cornerstone Lot # 4

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50 mi 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 3 exact length of each ditch 50 ft. width of ditches 3 ft. depth of ditches 18 in. ^{MAX}

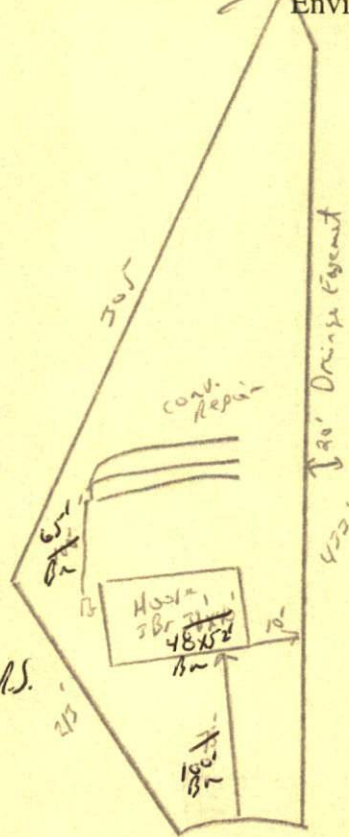
French Drain Required: _____ Linear feet

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

Date: 2/25/2002
Signed: Bryan M. Lewis R.S.
Environmental Health Specialist

* Maintain all setbacks
* Road ditches on contour + NO DEEPER than 18 inches
* Actual layout may differ from permit

* Changes made 5/29/2002
Bryan M. Lewis R.S.



* Not to scale

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 # 17670. 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.*

R.L. Properties Name 919-639-4295 Telephone #

4590 Old Basin Creek Rd Angier, N.C. 2754 Address

1532 Property Location SR# Hayden Road Name

Cover Stone Subdivision 4 Lot # 3 # Bedrooms Proposed .751Ac Lot size

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 1 # of lines per field 3 Length of lines 50 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.

[Signature] Signature of Authorized Agent for Harnett County 2/25/02 Date