

IMPROVEMENT PERMIT

02-5-4023

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) Danny Areas / Cumberland Home New Installation Septic Tank
 Property Location: SR# 1115 Repairs Nitrification Line

Subdivision Peachtree Lot # 167

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (28x48) Lot Size: 0.48 ac

Basement with Plumbing: Garage: NOTE CAN move house BACK & TO THE RIGHT and can possibly get out of A pump.
 Water Supply: Well Public Community
 Distance From Well: 55 ft.

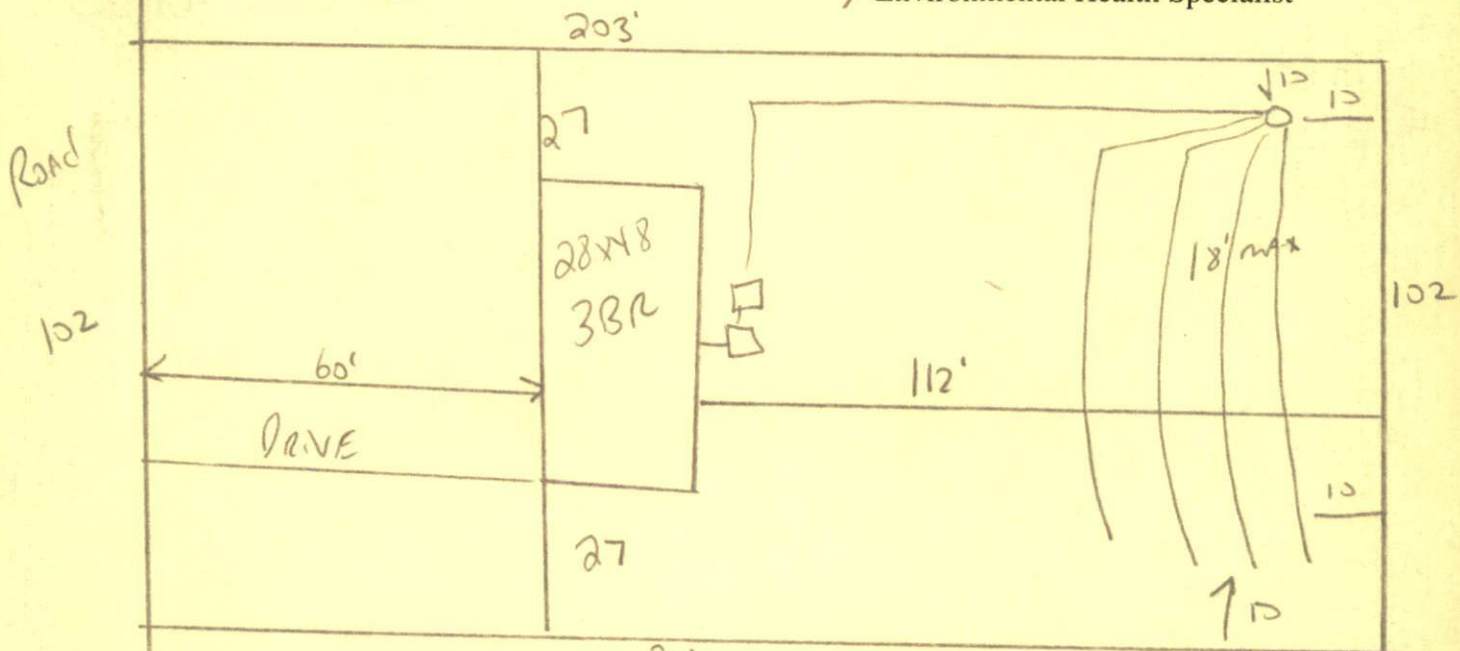
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other Pumps Conventional
 Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons
 Subsurface Drainage Field No. of ditches 4 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 18 in. MAX
 French Drain Required: _____ Linear feet

Date: 03-13-02

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

Signed: Joe Waters
 Environmental Health Specialist



MAY Be Able To get out of a pump by moving house BACK (30') and over to the RIGHT (10') - MAINTAIN ALL setBACKS 18" Ditch Depth Follow contours - Do not DRIVE OR park on 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 # 19001. 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 Nancy Norris Telephone # 910-842-4345

Address _____

Property Location SR# 1115 Road Name _____

Subdivision Peoples Tree Lot # 167 # Bedrooms Proposed 3 (28x48) Lot size .48 AC

TYPE OF SYSTEM

New Installation [] Repair Septic Tank Nitrification Lines

Conventional Other _____

[] Basement [] With Plumbing [] Without Plumbing

Water Supply: [] Well Public - Minimum Well Setback: _____ Ft.

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 4 Length of lines 75 Ft.

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

Signature of Authorized Agent for Harnett County [Signature] Date 3-13-02