

IMPROVEMENT PERMIT

02-5-4158

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 Norris Millennium Homes

New Installation

Septic Tank

Property Location: SR# 1115

Repairs

Nitrification Line

Subdivision Crestraw

Lot # 58

Tax ID # _____

Quadrant # _____

Number of Bedrooms Proposed: 3 (45x56)

Lot Size: 345 Ac

Basement with Plumbing:

Garage:

Water Supply: Well

Public

Community

Distance 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: _____ gallons

Subsurface Drainage Field

No. of ditches 1

exact length of each ditch 200 ft.

width of ditches 3 ft.

depth of ditches 18-24 in.

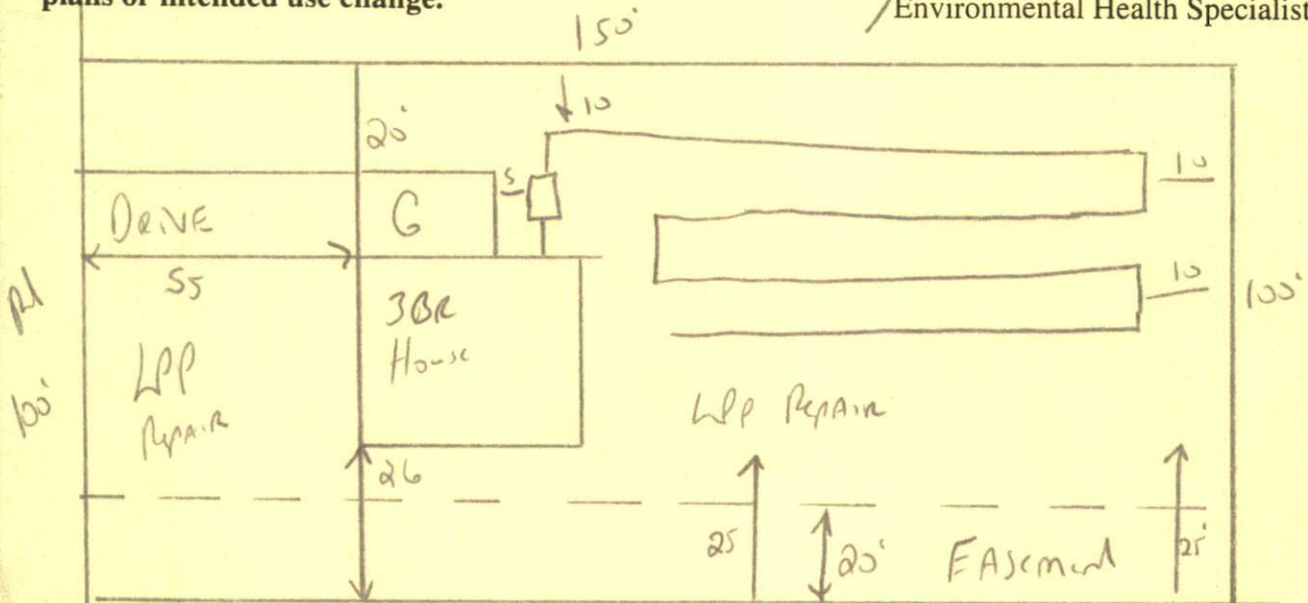
French Drain Required: _____ Linear feet

Date: 03-15-02

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

Signed: [Signature]

Environmental Health Specialist



STUB OUT Plumbing shallow where shown or pump will be required - Free Drain Lines 25' from Property Line with DRAIN EASEMENT Along It. DO NOT DRIVE OR PARK ON Septic system - maintain ALL setBACKS

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 # 19011. 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.

Danny Morris Millennium Home 910-892-4345
Name Telephone #

Address

7115
Property Location SR# Road Name

Crestview 58 3(45x56) 345 AC
Subdivision Lot # # Bedrooms Proposed 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: _____ Ft.

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 200 Ft.

Width of ditches 3 ft. Depth of ditches 18.24 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] 03-15-02
Signature of Authorized Agent for Harnett County Date