

02-5-4252

HARNETT COUNTY HEALTH DEPARTMENT

No 19104

# 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) JUDY WILLIAM GREEN  New Installation  Septic Tank  
Property Location: SR# NC42  Repairs  Nitrification Line

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_

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

Number of Bedrooms Proposed: 3 Lot Size: 2.58 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 \_\_\_\_\_

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

Subsurface No. of exact length width of depth of  
Drainage Field ditches 5 of each ditch 80 ft. ditches 3 ft. ditches 24 in.

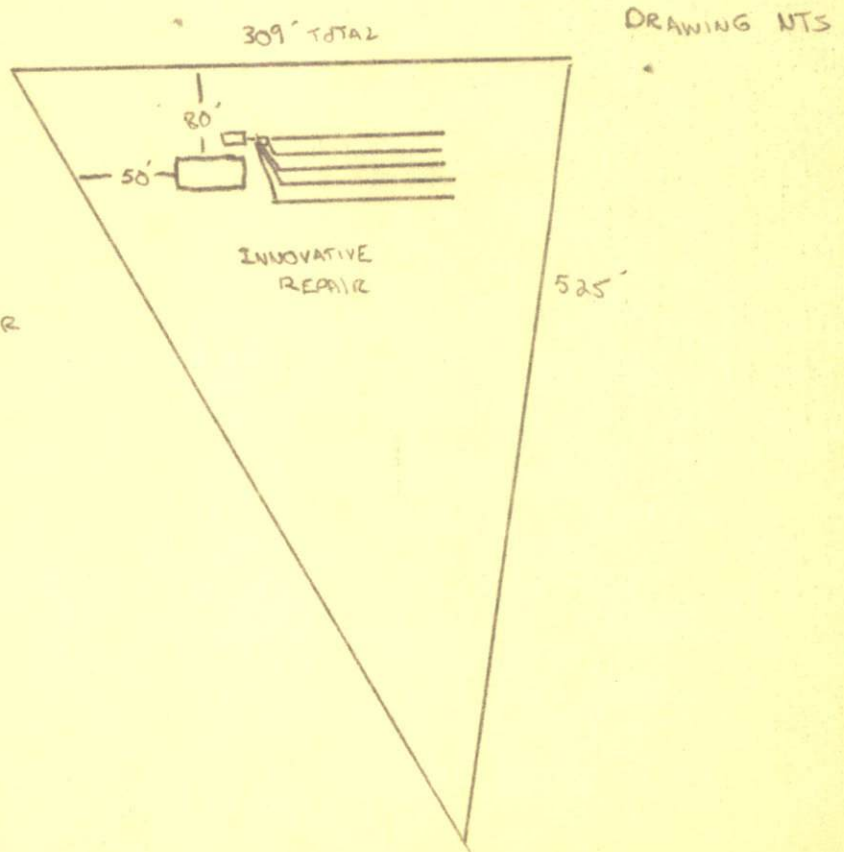
French Drain Required: \_\_\_\_\_ Linear feet

Date: 3/26/02

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

Signed: [Signature]  
Environmental Health Specialist

- \* MAINTAIN ALL SETBACKS
- \* RUN LINES ON CONTOUR
- \* SYSTEM MAY BE CHANGED TO A 400' LINE IF NECESSARY
- \* CALL WITH ANY QUESTION PRIOR TO INSTALLATION



NETT 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 # 19104. 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.*

JUDY WILLIAM GREEN 919-523-3098  
Name Telephone #

912 DUNHAM ST FURQUAY VARINA NC 27526  
Address

NC42 \_\_\_\_\_  
Property Location SR# Road Name

\_\_\_\_\_ 3 2.58 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: 100 Ft.

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 5 Length of lines 80 Ft.

Width of ditches 3 ft. Depth of ditches 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] 3/26/02  
Signature of Authorized Agent for Harnett County Date