

02-5-4283

# 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) Bobby Tyler Dewar

New Installation     Septic Tank

Property Location: SR# 1423 Tyler Dewar Ln.

Repairs     Nitrification Line

Subdivision Chris A. Battist Comer Lot # 5

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

Number of Bedrooms Proposed: 4 Lot Size: 10 Ac

Basement with Plumbing:  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 \_\_\_\_\_

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

Subsurface Drainage Field: No. of ditches 5 exact length of each ditch 110 ft. width of ditches 3 ft. depth of ditches 18-24 in.

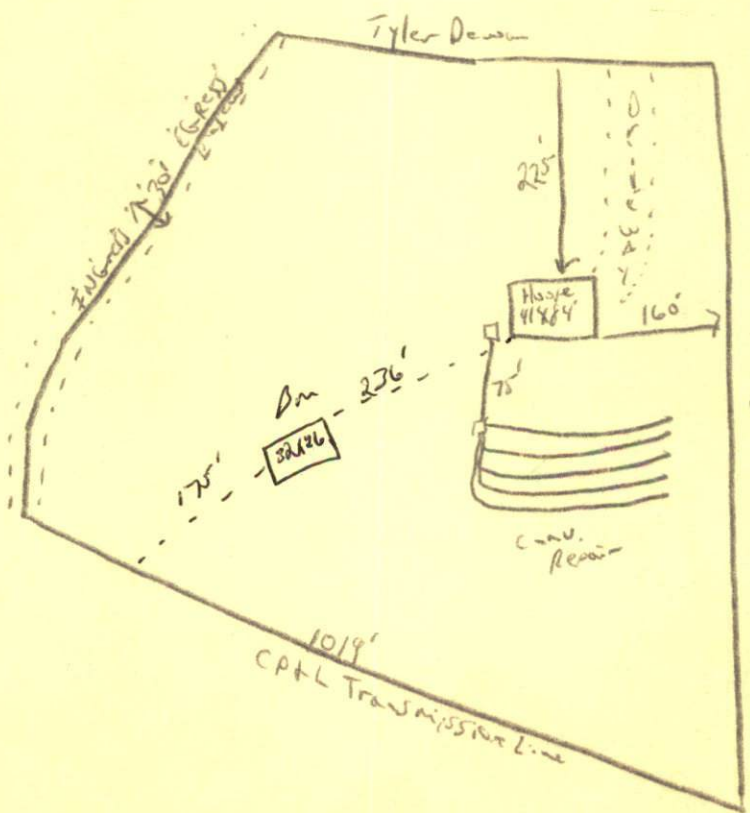
French Drain Required: \_\_\_\_\_ Linear feet

Date: 5/26/2002

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

Signed: Bryan McJannet R.S.  
Environmental Health Specialist

\* Maintain all setbacks  
\* Run ditches on contour



HARNETT COUNTY HEALTH DEPARTMENT  
THORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system t specifications described by Harnett County Health Department, Improvement Permit # 17693. 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 Bobby Tyler Dewar Telephone # 919-552-5973

Address 5070 River Rd. Fuquay Varina N.C. 27526 Road Name Tyler Dewar Lane

Property Location SR# 1423 Lot # 5 # Bedrooms Proposed 4 Lot size 10 Ac  
Subdivision Chris A. Prathist + Camera

**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 5 Length of lines 110 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 of Authorized Agent for Harnett County Benny McSwain R.S. Date 3/26/2002