

## 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) Tiffany A. Edge☒ New Installation ☒ Septic TankProperty Location: SR# 1412 Christian Light☐ Repairs☒ Nitrification LineSubdivision \_\_\_\_\_ Lot # 1

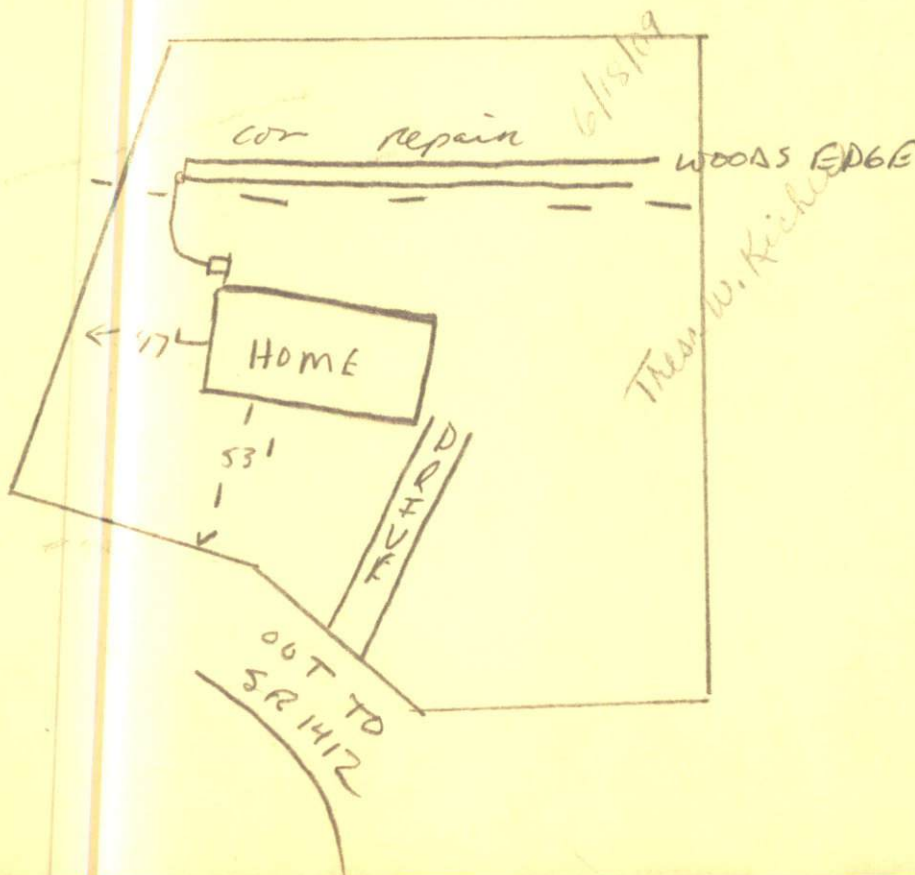
Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 3 Lot Size: .8 acreBasement with Plumbing: ☐ Garage: ☐Water Supply: ☐ Well ☒ Public ☐ CommunityDistance 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: \_\_\_\_\_ gallonsSubsurface No. of exact length width of depth of  
Drainage Field ditches 2 of each ditch 150 ft. ditches 3 ft. ditches 18-20 in.French Drain Required: - Linear feetDate: 4-19-02

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

Signed: James C. Marshall  
Environmental Health Specialist

02-5-4447

# HA TT 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 # 19170. 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.

Tiffany R. Freese 919-552-6308  
 Name Telephone #  
2123 Christina Light Rd F.V. N.C. 27526  
 Address  
1412 Christina Light  
 Property Location SR# Road Name  
 Subdivision 1 Lot # 3 # Bedrooms Proposed 8 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 2 # of lines per field 2 Length of lines 150 Ft.

Width of ditches 3 ft. Depth of ditches 18-20 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.

James E. Montanaro  
 Signature of Authorized Agent for Harnett County

4-15-02  
 Date