

# 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) ROGER EDWARDS  New Installation  Septic Tank  
Property Location: SR# 1443 LAFAYETTE RD  Repairs  Nitrification Line

Subdivision VICTORIA HILLS III Lot # 78

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

Number of Bedrooms Proposed: 3 Lot Size: 30908 sq ft

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 Drainage Field No. of ditches 5 exact length of each ditch 80 ft. width of ditches 3 ft. depth of ditches 18-20 in.

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

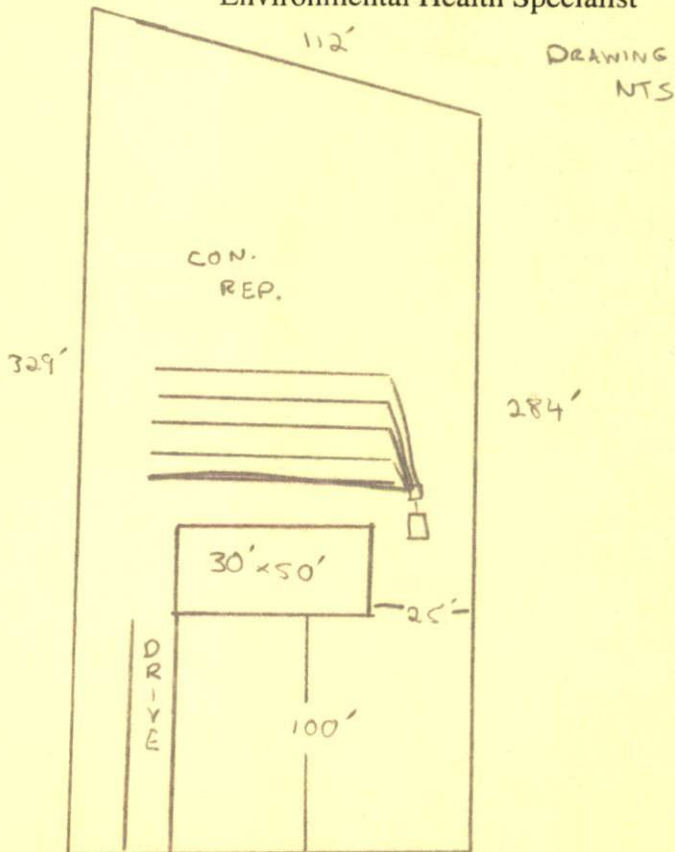
Date: 5/7/02

Signed: [Signature]

Environmental Health Specialist

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

- \* MAINTAIN ALL SETBACKS
- \* RUN LINES ON CONTOUR
- \* CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION



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 # 19135. 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.*

ROGER EDWARDS 919-669-5353  
Name Telephone #  
1879 GOAT ISLAND RD SUMMERSON SC 29148  
Address  
1443 LAFAYETTE RD  
Property Location SR# Road Name  
VICTORIA HILLS III 78 3 30908 ft<sup>2</sup>  
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.  
Septic Tank 1000 Pump Chamber \_\_\_\_\_

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 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] 5/7/02  
Signature of Authorized Agent for Harnett County Date