

03-5-5483

HARNETT COUNTY HEALTH DEPARTMENT

No 19608

IMPROVEMENT PERMIT

03-5-5483

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) Ricky Surles
Property Location: SR# 1540 Montague Rd.
New Installation, Septic Tank, Repairs, Nitrification Line

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

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

Number of Bedrooms Proposed: 4 Lot Size: 2.50 acres

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

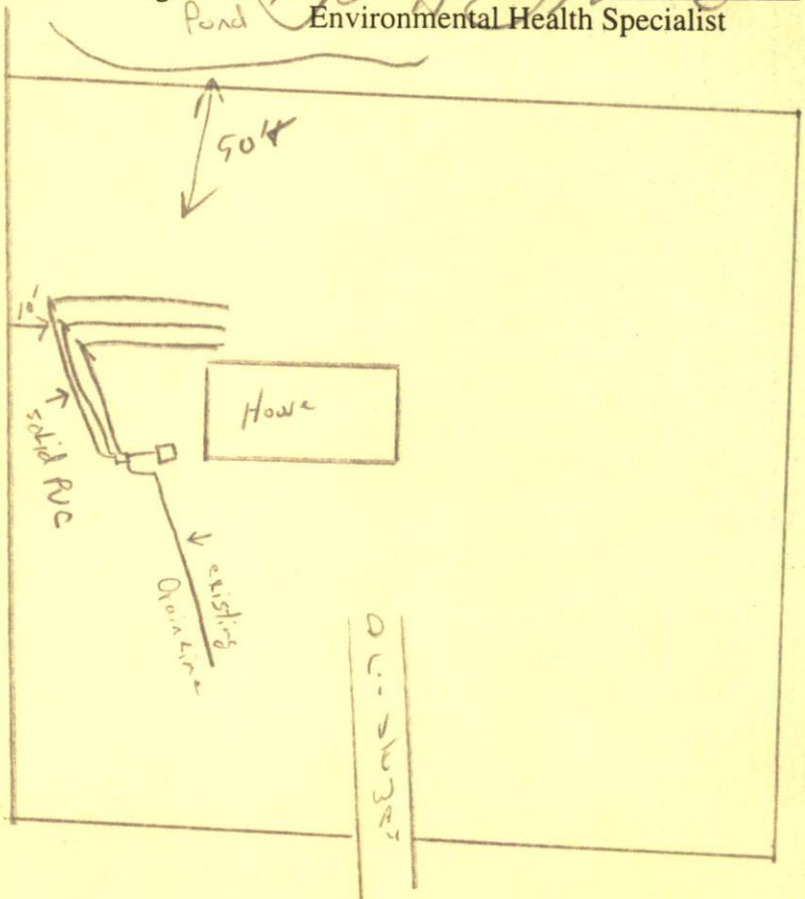
Subsurface Drainage Field No. of ditches 3 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18-20 in.

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

Date: 03/19/03
Signed: [Signature] Environmental Health Specialist

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

- \* Run Solid PVC from D-Box Down to beginning of Lines @ 50' in length
\* contractor must meet on site prior to installation
\* Contractor must be registered with this Department prior to the issuance of an operations permit.



HARNE 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 # 19608. 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 Ricky Surles Telephone# \_\_\_\_\_

Address \_\_\_\_\_

Property Location SR# 1540 Road Name Montague

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_ # Bedrooms Proposed 4 Lot Size 2.50 acres.

**TYPE OF SYSTEM**

New Installation    Repair    Septic Tank    Nitrification Lines

Conventional    Other \_\_\_\_\_

Basement    With Plumbing    Without Plumbing

Water Supply:  Well    Public Water Supply   Minimum Well Setback: \_\_\_\_\_ Ft.

Septic Tank 1000 gal Pump Chamber \_\_\_\_\_ gal

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 3 + 1 existing Length of lines 100 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.

Signature of Authorized Agent for Harnett County of Harnett A. H. Boyd R.S.

Date 03/19/03