

Revision

HARNETT COUNTY HEALTH DEPARTMENT

No 19941

IMPROVEMENT PERMIT

03-5-5917

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 & Tammy Lawson

New Installation Septic Tank

Property Location: SR# Pine Street

Repairs Nitrification Line

Subdivision Pine Hills

Lot # 7

Tax ID # _____

Quadrant # _____

Number of Bedrooms Proposed: 3 (64x67)

Lot Size: 175x150 x 175x150

Basement with Plumbing:

Garage: MUST meet onsite Before

Water Supply: Well Public

Community Installing

Distance 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 Pump to ultra shallow

Size of tank: Septic Tank: 1000 gallons

Pump Tank: 1000 gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 350 ft. width of ditches 3 ft. depth of ditches 12 in.

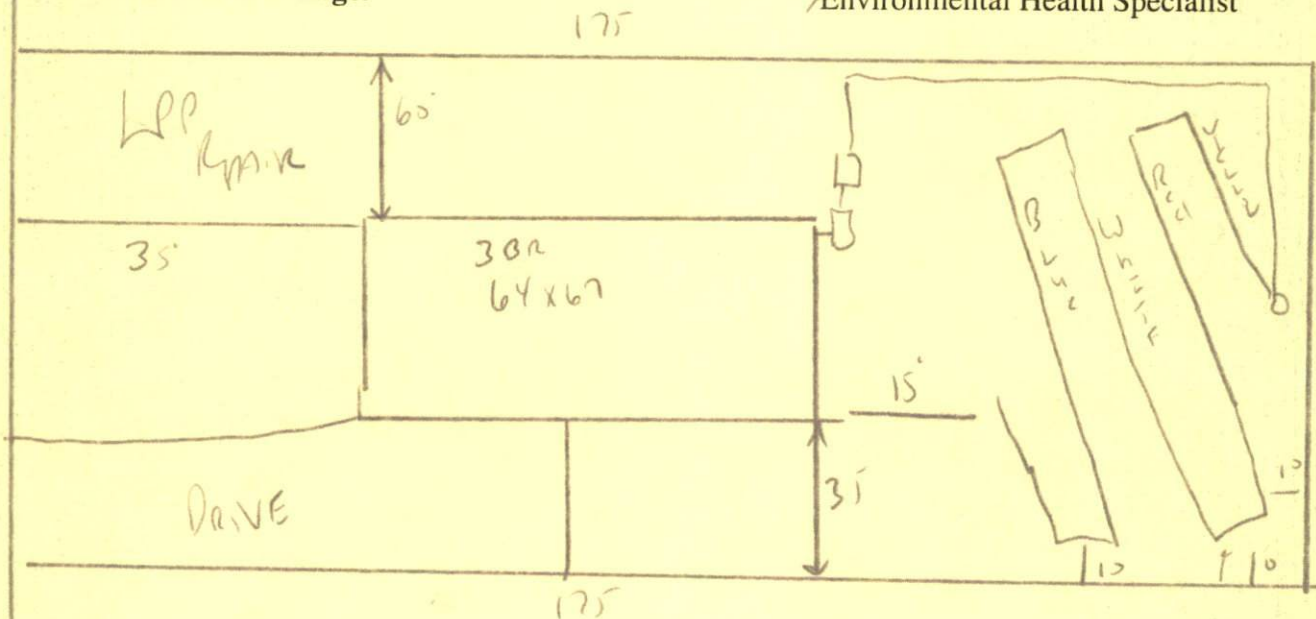
French Drain Required: _____ Linear feet

Date: 2-18-03

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

Signed: [Signature]

Environmental Health Specialist



Meet onsite Before Installing septic system
 Must Be in 8 to 12" of approval cover
 Maintain All set Backs - Note All Drain Lines must Be
 15' from all vertical cut 2' or greater

HARNETT COUNTY HEALTH DEPARTMENT
AUTHORIZATION TO CONSTRUCT

REV 1P# 19941

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 1992Y. 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 Rich & Tony Lawson Telephone# _____

Address _____

Pine St.

Property Location SR# _____ Road Name _____

Pine Hills 7 3(64x67) 175x100x175x150

Subdivision _____ Lot # _____ # Bedrooms Proposed _____ Lot Size _____

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other plug & ultra shallow

Basement With Plumbing Without Plumbing

Water Supply: Well Public Water Supply Minimum Well Setback: 50 Ft.

Septic Tank 1000 Pump Chamber 1000

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 350 Ft.

Width of ditches 3 ft. Depth of ditches 12 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 [Signature]

Date 2-18-03