

IMPROVEMENT PERMIT

03-5-5921

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) Danny Nokes  New Installation  Septic Tank
Property Location: SR# 1115  Repairs  Nitrification Line

Subdivision Peach Tree Lot # 136

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

Number of Bedrooms Proposed: 3 (28x50) Lot Size: .46 AC

Basement with Plumbing:  Garage:

Water Supply:  Well  Public  Community

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 \_\_\_\_\_

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

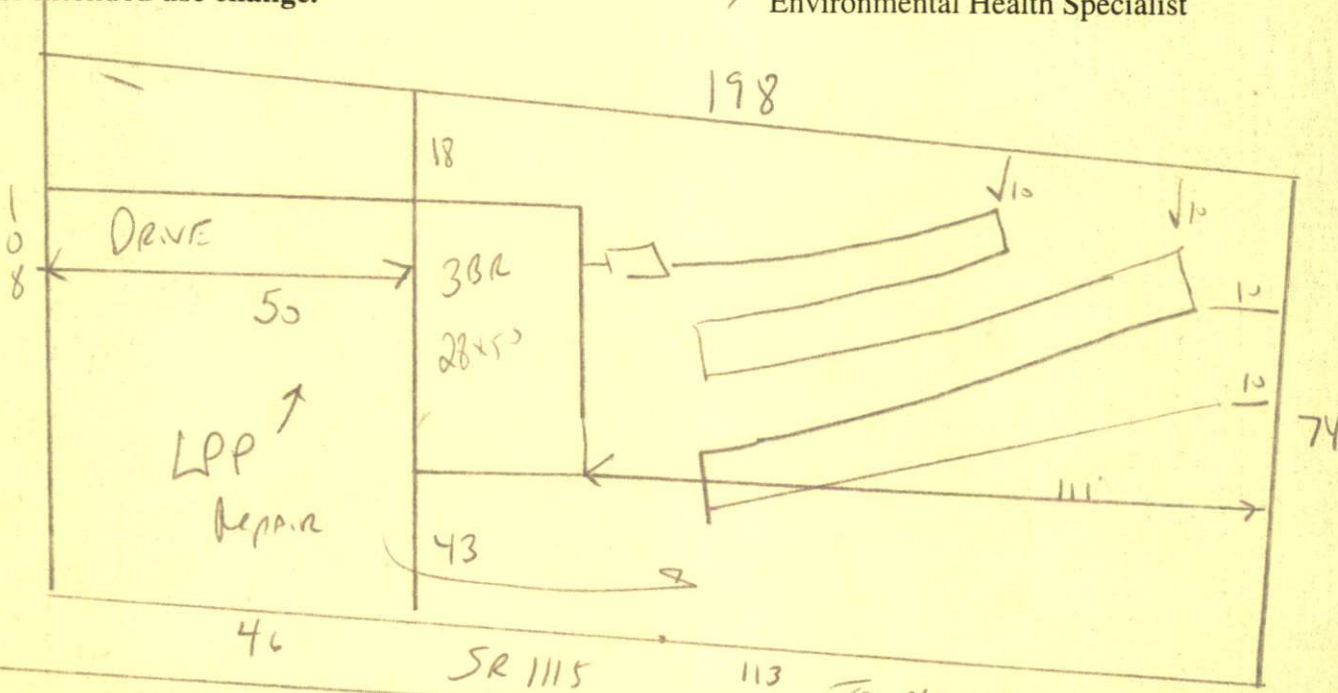
Subsurface Drainage Field No. of 1 exact length 240 width of 3 depth of 18 2/4 ditches \_\_\_\_\_ of each ditch \_\_\_\_\_ ft. ditches \_\_\_\_\_ ft. ditches \_\_\_\_\_ in.

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

Date: 11-26-02

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

Signed: [Signature] Environmental Health Specialist



STUB out Plumbing shallow where shown or A Pump MAY be Required
Maintain All Set Backs - Follow contours - Do not Drive or park on Septic system



HARNETT COUNTY HEALTH DEPARTMENT  
AUTORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 19902. 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.

Danny Noffs 892-4345  
Name Telephone #

Address \_\_\_\_\_

1115  
Property Location SR# Road Name

French Hill 136 3 (28x50) 4.6 Ac  
Subdivision Lot # # Bedrooms Proposed Lot size

**TYPE OF SYSTEM**

New Installation [ ] Repair  Septic Tank  Nitrification Lines  
 Conventional Other 10 [ ] Basement [ ] With Plumbing [ ] Without Plumbing

Water Supply: [ ] Well  Public - Minimum Well Setback: 50 Ft.  
Septic Tank 7000 Pump Chamber \_\_\_\_\_

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 1 Length of lines 240 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.

Joe Williams 11-26-02  
Signature of Authorized Agent for Harnett County Date