

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

Subdivision Peach Tree Lot # 107

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (50x28) Lot Size: 0.482 ac

Basement with Plumbing: Garage: NOTE IF house is moved Back, so that house is 100 from water oak circle Pump will not be Required
Water Supply: Well Public Community
Distance From Well: 50 ft.

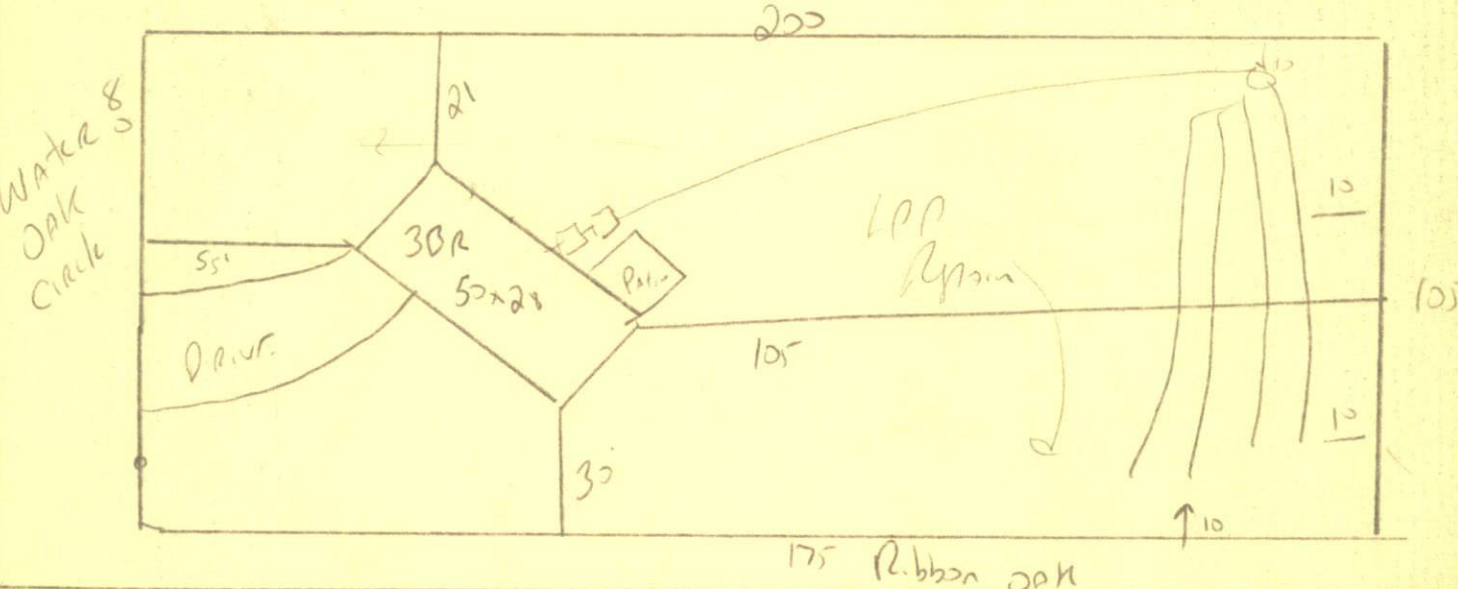
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other Pump to conventional
Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons
Subsurface Drainage Field No. of ditches 4 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 18 in.
French Drain Required: _____ Linear feet

Date: 12-9-02

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

Signed: Joe Winder
Environmental Health Specialist



NOTE IF house is moved Back, so that house is 100 from water oak circle Then pump will more than Likely will not 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 # 17916. 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 Danny Norman Telephone # 892-4241

Address _____

Property Location SR# 115 Road Name _____

Subdivision Peach Tree Lot # 107 # Bedrooms Proposed 3(5x28) Lot size 0.482 ac

TYPE OF SYSTEM

New Installation [] Repair Septic Tank Nitrification Lines

[] Conventional Other Pump to Conv. [] Basement [] With Plumbing [] Without Plumbing

Water Supply: [] Well Public - Minimum Well Setback: 50 Ft.
Septic Tank 1000 Pump Chamber 1000

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 4 Length of lines 75 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 of Authorized Agent for Harnett County [Signature] Date 12-5-02