

IMPROVEMENT PERMIT

03-5-6196

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 Norris New Installation Septic Tank
Property Location: SR# 1115 Repairs Nitrification Line

Subdivision CRESTVIEW Lot # 78

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (38 x 56) Lot Size: 543

Basement with Plumbing: Garage: Please note - move house back

Water Supply: Well Public Community 20' more from the front property line

Distance From Well: 50 ft. (70' TOTAL) & Pump may NOT be Required

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

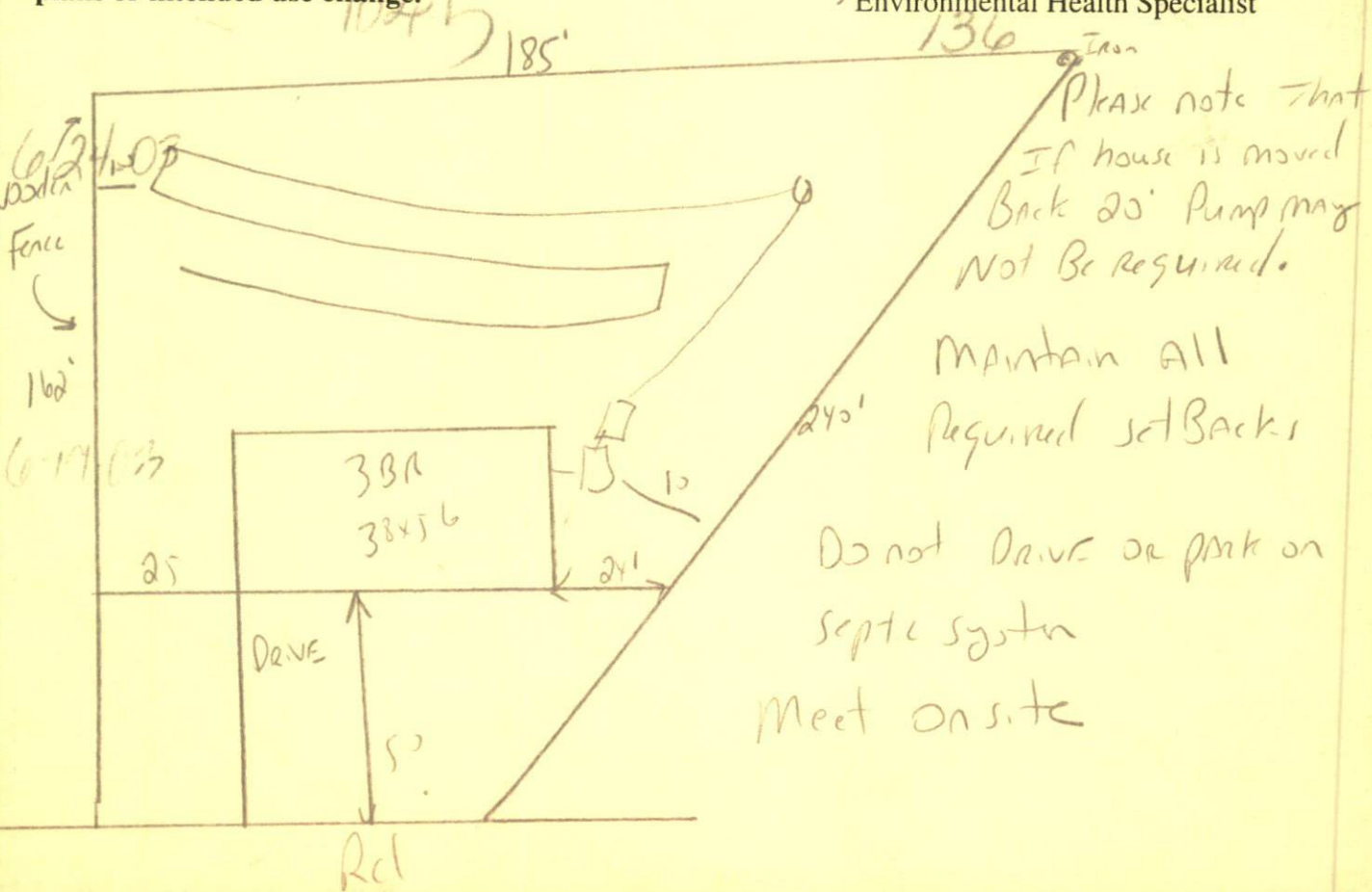
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 240 ft. width of ditches 3 ft. depth of ditches 1824 in.

French Drain Required: _____ Linear feet

Date: 01-13-03

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

Signed: Joe WARS
Environmental Health Specialist



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 # 19215. 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 Norais Telephone# 892-4345

Address 1115
Property Location SR# 78 Road Name 543
Subdivision Crestview Lot # 78 # Bedrooms Proposed 3(38x56) Lot Size 543

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines
 Conventional Other Pump to Conventional
 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 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.

Signature of Authorized Agent for Harnett County of Harnett [Signature] Date 01-17-03