

IMPROVEMENT PERMIT

03-5-6503

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

Subdivision CRESTVIEW Lot # 105

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

Number of Bedrooms Proposed: 3 (43x52) Lot Size: 0.348 AC

Basement with Plumbing:  Garage:

Water Supply:  Well  Public  Community

Distance From Well: \_\_\_\_\_ 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

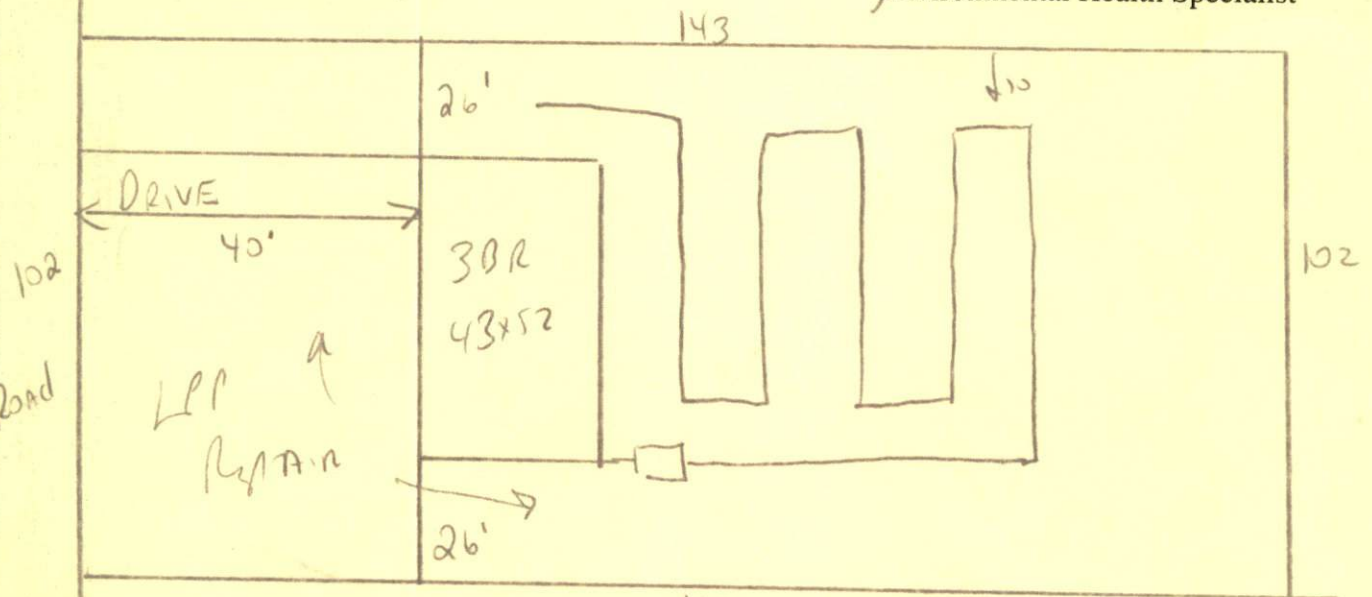
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 240 ft. width of ditches 3 ft. depth of ditches 18-36 in.

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

Date: 02-24-03

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

Signed: [Signature] Environmental Health Specialist



STUB out Plumbing where shown or Pump may be required. MAINTAIN All set Backs. Start Lines Run to 36" Turn and work Back to 18 to 24" Ditch Pyths. Do not Drive or Park on septic system

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 # 19949. 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 Noveis  
Name

892-4345  
Telephone#

Address

1115

Property Location SR#

Chestnut

105  
Lot #

3 (43x52)  
# Bedrooms Proposed

Road Name

346 AC  
Lot Size

Subdivision

**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 1 Length of lines 240 Ft.

Width of ditches 3 ft. Depth of ditches 18-36 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]  
Signature of Authorized Agent for Harnett County of Harnett

02-24-03  
Date