

IMPROVEMENT PERMIT

03-5-6616

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) Allan Canady Builders

New Installation Septic Tank

Property Location: SR# 1115

Repairs Nitrification Line

Subdivision LAKE CRESTVIEW Lot # 8

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (50x40) Lot Size: 62Ac

Basement with Plumbing: Garage: Meet onsite Before

Water Supply: Well Public Community Installing septic system

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

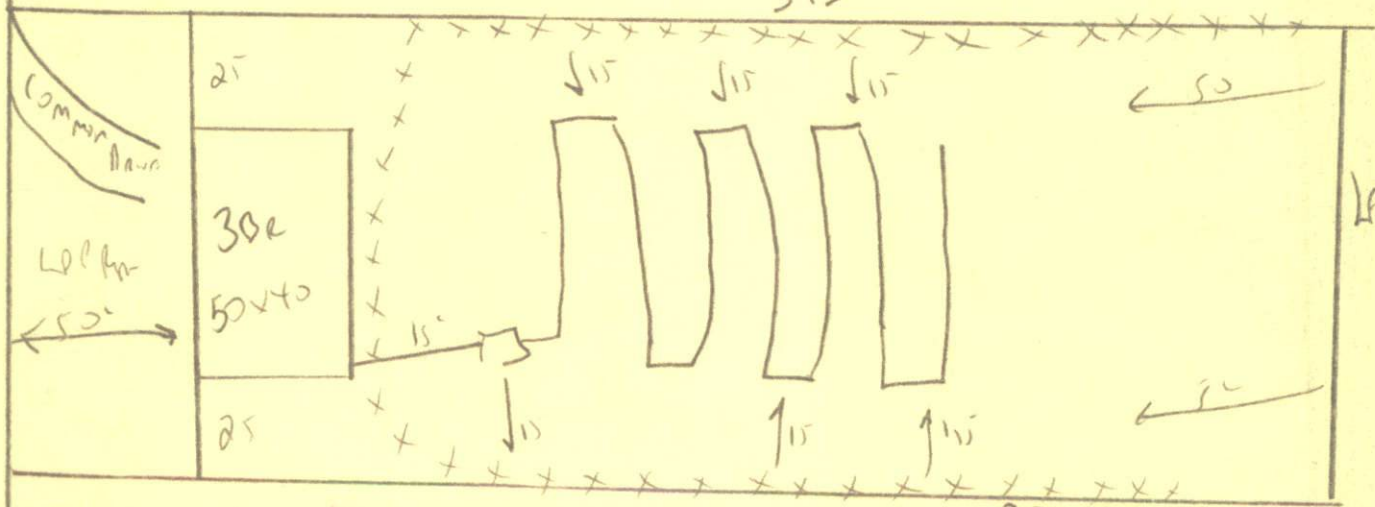
Subsurface No. of exact length width of depth of
Drainage Field ditches 1 of each ditch 270 ft. ditches 3 ft. ditches 18" x 4 in.

French Drain Required: Appx 500 Linear feet

Date: 03-18-03

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

Signed: [Signature]
Environmental Health Specialist



Meet onsite French Drain to be Along Property Line to be Shared with Lots Next Door French Drain to be 42" Deep with 36" of gravel & 4" Pipe
MAINTAIN ALL SET BACKS
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 # 19272. 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.

Allan Canady Builder
Name

Telephone#

Address

1715

Property Location SR#

Lake ~~Crestview~~ Crestview 8

Road Name

3(50x70)

Subdivision

Lot #

Bedrooms Proposed

62 AC
Lot Size

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: 50 Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 270 Ft.

Width of ditches 3 ft. Depth of ditches 22.5 inches

French Drain: Linear feet required Appx 500 Depth of gravel 36"

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

03-18-03
Date