

#03-5-7189

HARNE COUNTY HEALTH DEPARTMENT

No 18832

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) Roland CRAIG Byrd

New Installation Septic Tank

Property Location: SR# 1415 Rawls Church

Repairs Nitrification Line

Subdivision Legacy AT Rawls Lot # 22

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: .683

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 ditches 4 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 24"-18"

French Drain Required: - Linear feet

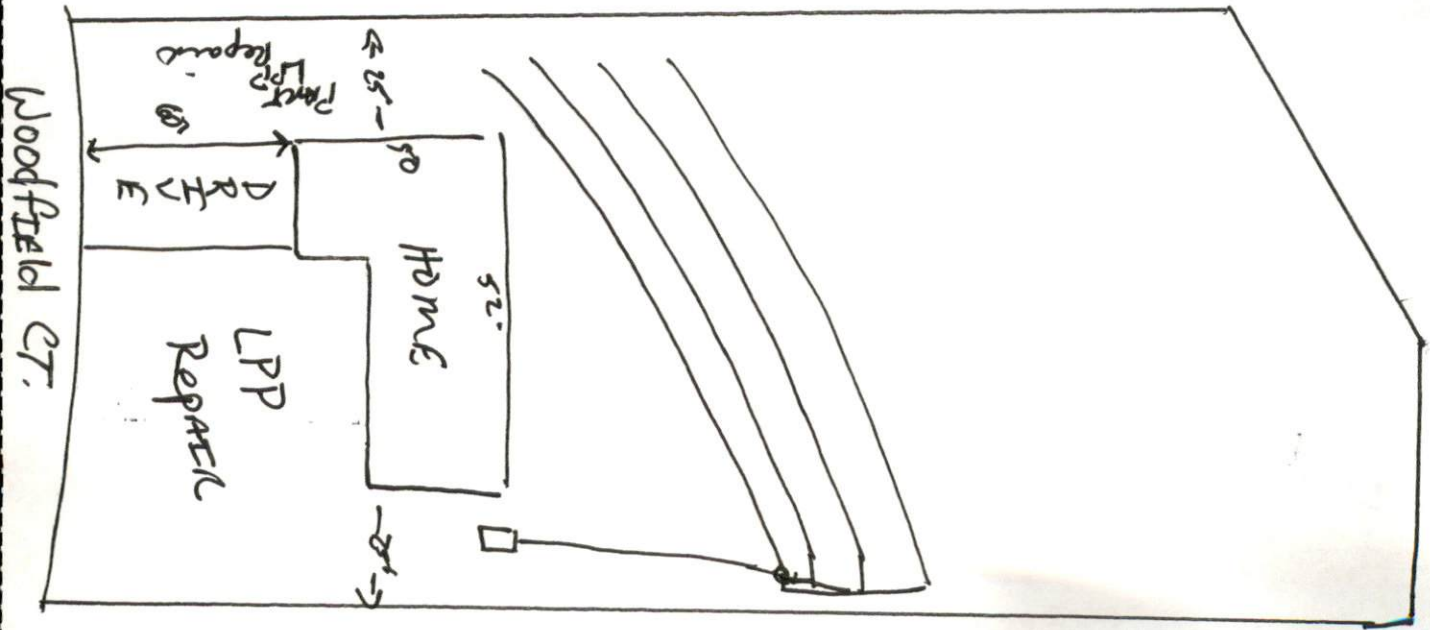
Date: 6-18-03

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

Signed: James E. Markant

Environmental Health Specialist

*UPPER LINES TO BE 24" then work toward 18" on bottom!



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 # 18832. 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 Roland Craig Byrd Telephone# 919-427-7524

Address 144 Well Lucas Rd Lenoir N.C. 28356

Property Location SR# 1415 Road Name Ranols Church

Subdivision Legacy at Ranols Lot # 22 # Bedrooms Proposed 3 Lot Size .683

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 2 # of lines per field 4 Length of lines 75 Ft.

Width of ditches 3 ft. Depth of ditches 24-18 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.

James E. Manhart R 122
Signature of Authorized Agent for Harnett County of Harnett

6-18-03
Date