

HTE 04-5-8549

21072

# 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) STAFFORD LAND CO.

New Installation  Septic Tank  
 Repairs  Nitrification Line

Property Location: SR# NC 87

Subdivision STARWOOD

Lot # 91

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

Number of Bedrooms Proposed: 3 (45x45) Lot Size: 0.57 AC

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 PUMP TO CHAMBER SYSTEM

Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons

Subsurface Drainage Field No. of ditches 4 exact length of each ditch 50 ft. width of ditches 3 ft. depth of ditches 18 in.

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

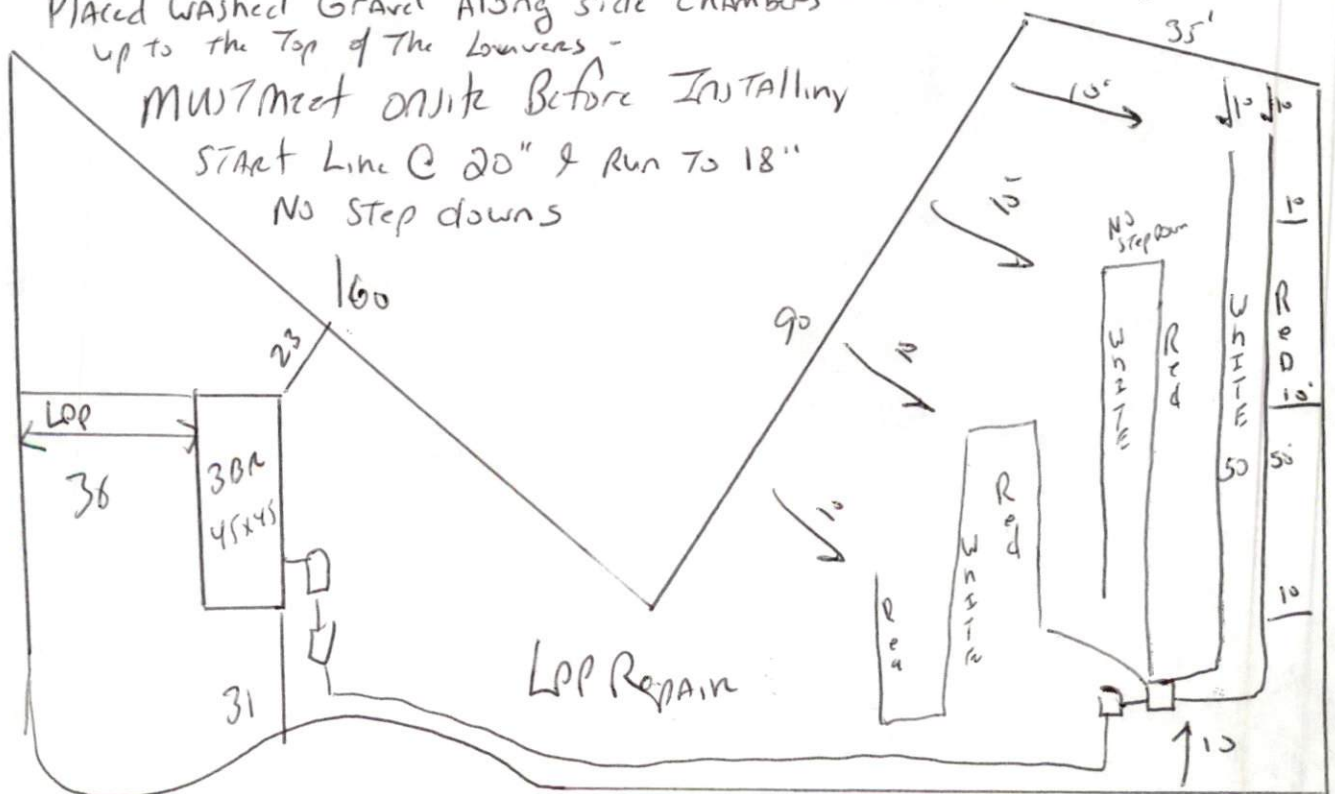
Date: 02-02-04

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

Signed: [Signature]  
Environmental Health Specialist

*Placed washed Gravel Along side chambers up to the Top of the Louvers - MUST meet onsite Before INSTALLING START Line @ 20" & Run To 18" NO STEP downs*

*Round A Boat*



*TALL Pines Court*

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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 # 21072. 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 STAFFORD LAND CO. Telephone# \_\_\_\_\_

Address NC 87

Property Location SR# \_\_\_\_\_  
Subdivision STAFFWOOD Lot # 91 # Bedrooms Proposed 3 (4.5x4.5) Road Name 57 AC Lot Size \_\_\_\_\_

**TYPE OF SYSTEM**

- New Installation     Repair     Septic Tank     Nitrification Lines
- Conventional     Other Pump to Chamber
- Basement     With Plumbing     Without Plumbing

Water Supply:  Well     Public Water Supply    Minimum Well Setback: 5 Ft.  
Septic Tank 1000 gal    Pump Chamber 1000 gal

**NITIRFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 4 Length of lines 50 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 of Harnett [Signature]

Date 02-02-04