

HTE 04-5-8721

# 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) BRIAN HERRING  New Installation  Septic Tank  
Property Location: SR# 1535 Mitchell  Repairs  Nitrification Line

Subdivision Hill Acres Lot # 7

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

Number of Bedrooms Proposed: 3 Lot Size: .60 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 25% Reduction System

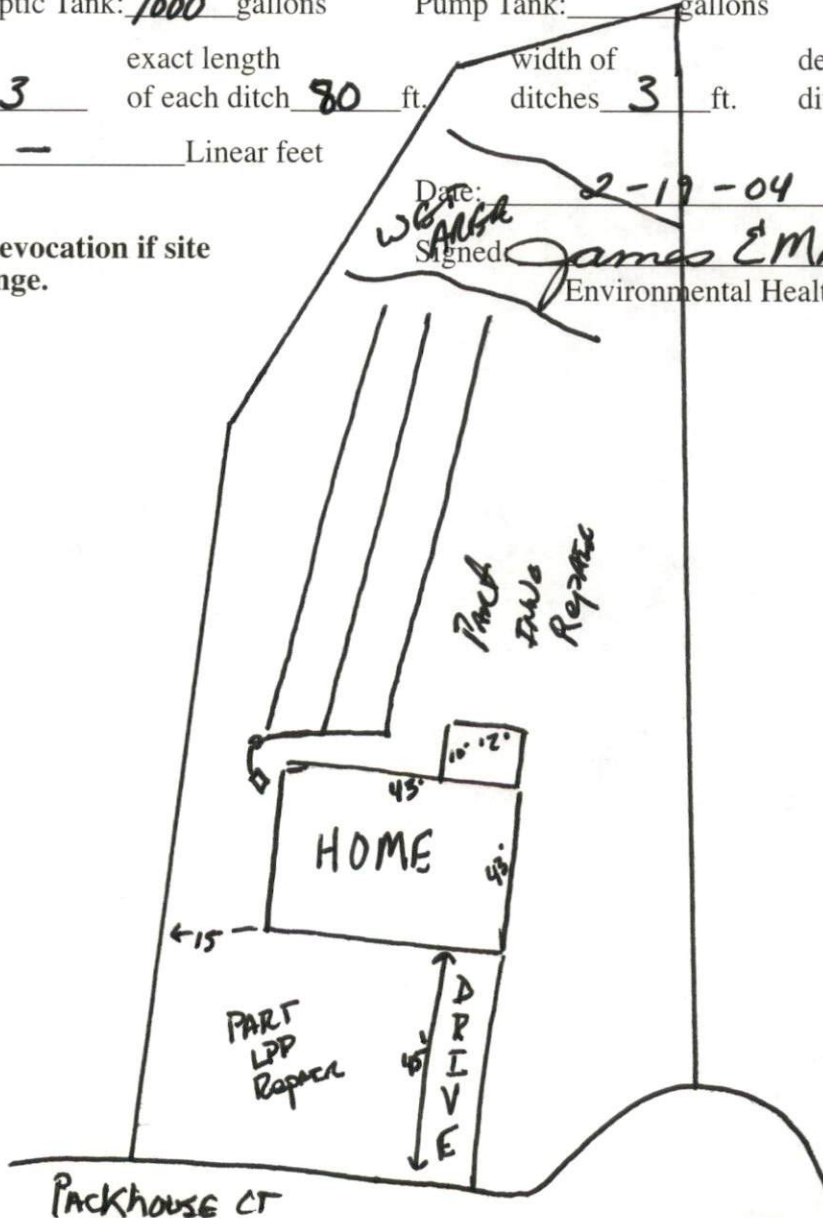
Size of tank: Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

Subsurface Drainage Field No. of ditches 3 exact length of each ditch 80 ft. width of ditches 3 ft. depth of ditches 24-18 in.

French Drain Required: - Linear feet

Date: 2-19-04  
Signed: James E. Markham  
Environmental Health Specialist

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



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 # 20610. 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 BRIAN HERNING Telephone# 814-9534

Address 164 MAE BYRD RD LELINGTON N.C. 27546

Property Location SR# 1535 Road Name Matchell

Subdivision H.H. ACRES Lot # 7 # Bedrooms Proposed 3 Lot Size .60

TYPE OF SYSTEM

- New Installation     Repair     Septic Tank     Nitrification Lines
- Conventional     Other 25% Reduction
- 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 3 Length of lines 80 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. Markham  
Signature of Authorized Agent for Harnett County of Harnett

2-12-04  
Date