

HTE 04-5-8899

20401

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) Kent Preece  New Installation  Septic Tank  
 Property Location: SR# 1141  Repairs  Nitrification Line

Subdivision High Land Forest Lot # 122

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

Number of Bedrooms Proposed: 3 (28x50) Lot Size: .35

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 2 Foot Wide Chamber

Size of tank: Septic Tank: 600 gallons Pump Tank: \_\_\_\_\_ gallons

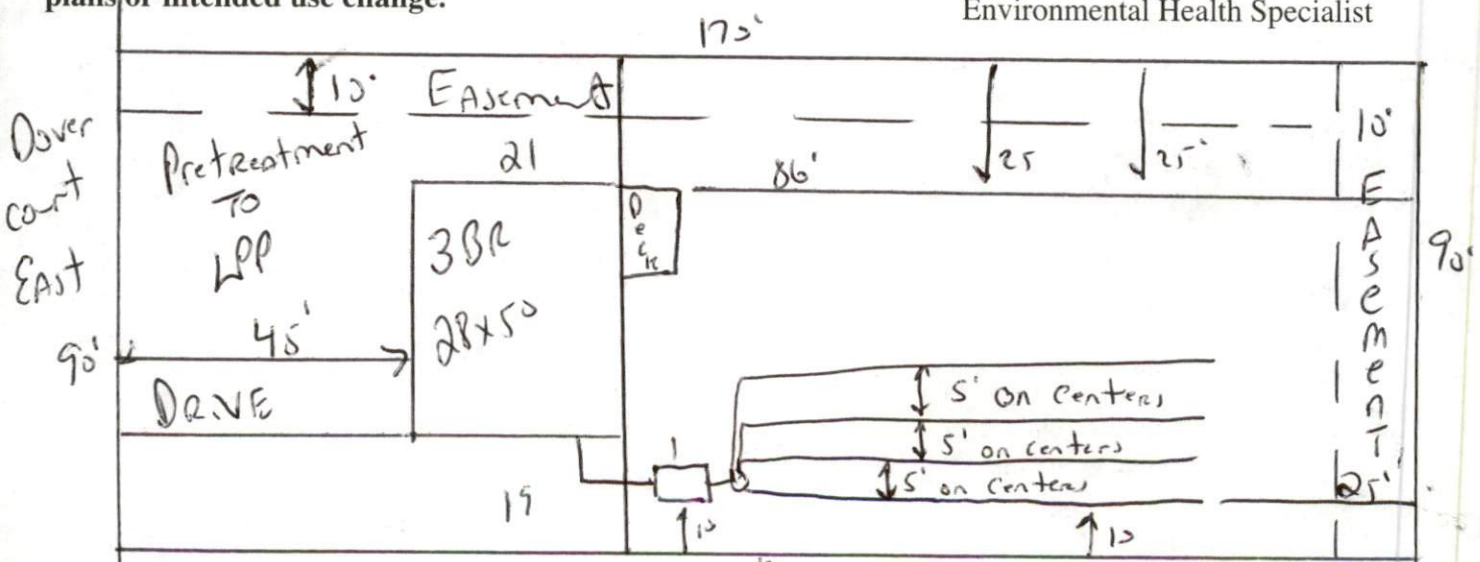
Subsurface Drainage Field No. of ditches 4 exact length of each ditch 50 ft. width of ditches 3 ft. depth of ditches 18 1/4 in.

French Drain Required: \_\_\_\_\_ Linear feet of 2 Foot Wide Chamber

Date: 3-22-04

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

Signed: [Signature]  
 Environmental Health Specialist



Keep Drain Lines 25' from Rear Property Line & side Line As Shown, with 2' wide chamber maintain 5' on centers. Keep SYSTEM Below Fill. Top of Pitches to be 8 to 12" Below Fill meet on site - must place washed stone along sides of chambers to prevent clogging

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH  
AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 20401. 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.*

Kent Pirce

Name \_\_\_\_\_ Telephone # \_\_\_\_\_

Address \_\_\_\_\_

1141

Property Location SR# \_\_\_\_\_ Road Name \_\_\_\_\_

Highland Forest 122 3(28x50) .35 AC  
Subdivision Lot # # Bedrooms Proposed Lot Size

**TYPE OF SYSTEM**

- New Installation [ ] Repair  Septic Tank  Nitrification Lines  
[ ] Conventional  Other 2' wide chamber  
[ ] 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 4 Length of lines 100 50 Ft.

Width of ditches 3 ft. Depth of ditches 18.24 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.

Joe WARRS

Signature of Authorized Agent for Harnett County

3-22-04

Date