

HTE 04-5-8928

IMPROVEMENT PERMIT

20691

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) CAVINESS Land
Property Location: SR# 1141
New Installation, Septic Tank, Repairs, Nitrification Line

Subdivision Highland Forest Lot # 105

Tax ID # Quadrant #

Number of Bedrooms Proposed: 4 (58x48) Lot Size: .35 Ac

Basement with Plumbing: Garage: X

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

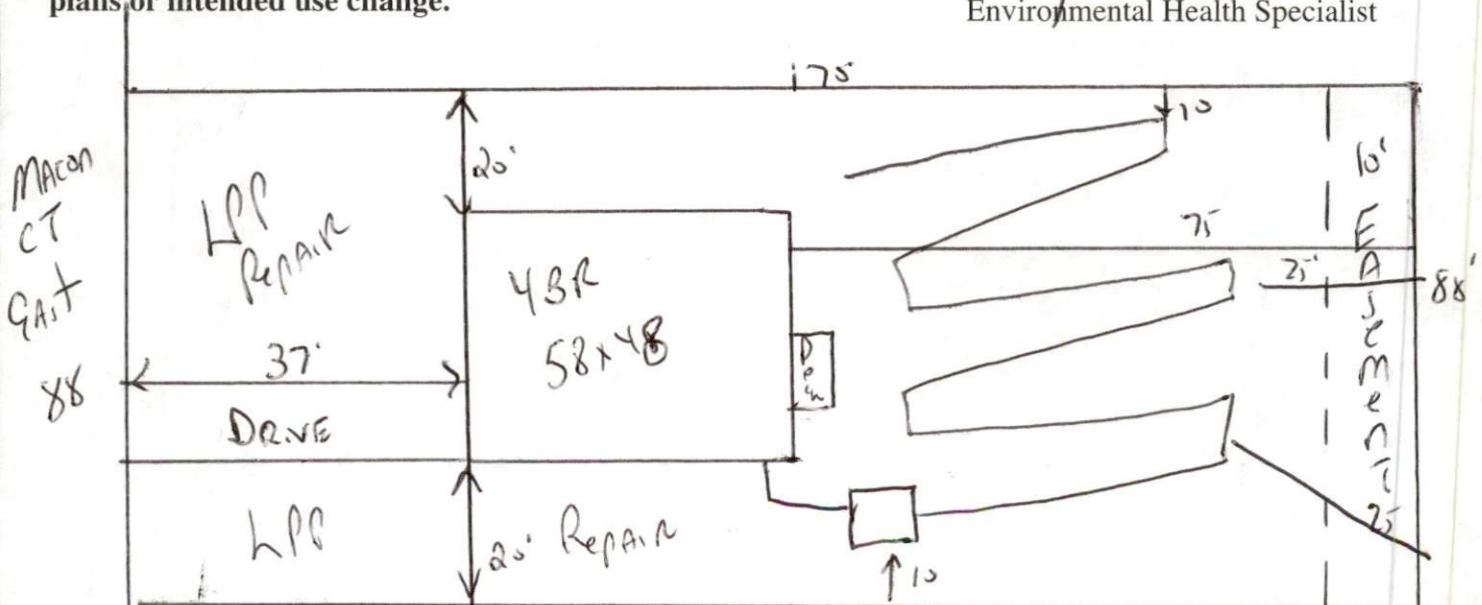
Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons

Subsurface Drainage Field: No. of ditches 1, exact length of each ditch 210 ft., width of ditches 3 ft., depth of ditches 18.24 in.

French Drain Required: Linear feet 25% Reduction SYSTEM

Install 210' of 25% Reduction system Date: 03-16-04

This permit is subject to revocation if site plans or intended use change. Signed: Environmental Health Specialist



Keep Drain Lines 25' from Rear Property Line OR 15' from Top of Easement Ditch
MAINTAIN ALL SETBACKS Meet Onsite Before Installing
If using Chamber SYSTEM must PLACE washed stone Along Louvers

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 # 20691. 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.*

CAVIN'S LAND

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

Address \_\_\_\_\_

1141

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

Highland Forest      105      4 (58x48)      35 AC  
Subdivision      Lot #      # Bedrooms Proposed      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 210 Ft.

Width of ditches 3 ft. Depth of ditches 18 1/2 inches    of 25% Reduction SYSTEM

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 WATTS  
Signature of Authorized Agent for Harnett County

03-16-04  
Date