

HTE 04-5-9327

IMPROVEMENT PERMIT

21171

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) Danny Morris
Property Location: SR# 1141
New Installation [X]
Repairs []
Septic Tank [X]
Nitrification Line [X]

Subdivision Highland Forest Lot # 52

Tax ID # Quadrant #

Number of Bedrooms Proposed: 3(48x49) Lot Size: .42AC

Basement with Plumbing: [] Garage: [X]

Water Supply: [] Well [X] 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: [X] Conventional [X] Other Pump to Conventional

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

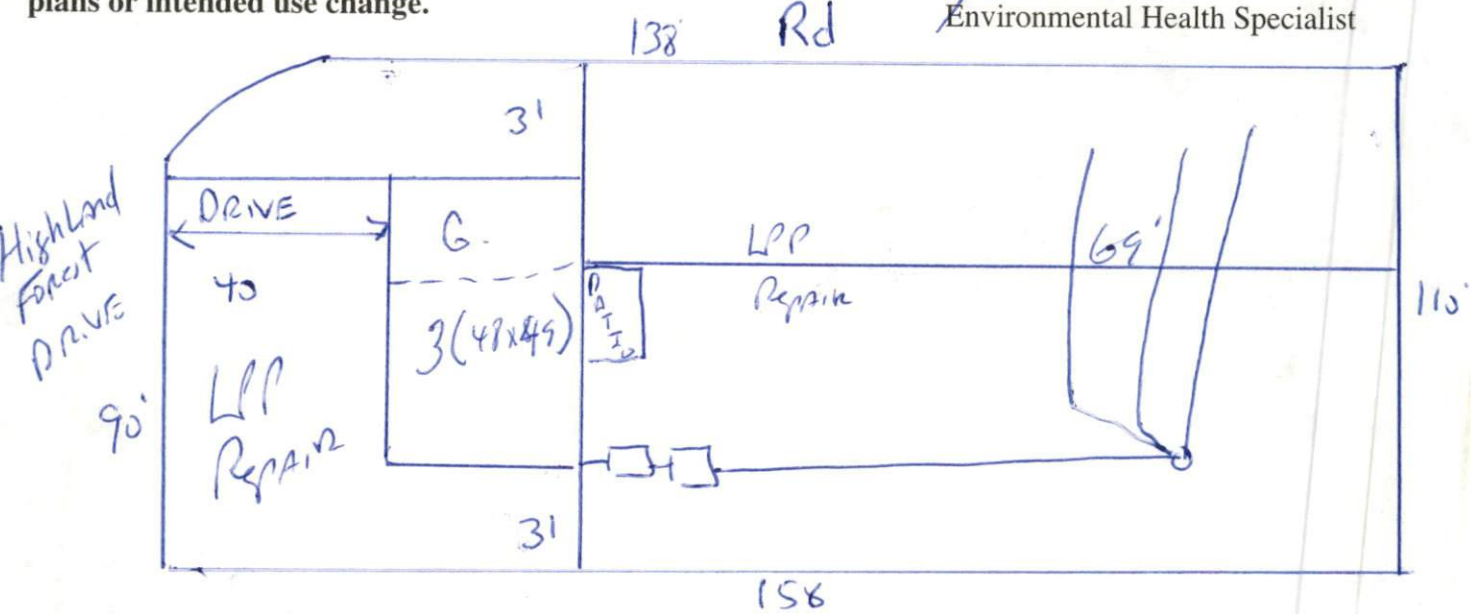
Subsurface Drainage Field No. of ditches 3 exact length of each ditch 70 ft. width of ditches 3 ft. depth of ditches 18 1/2 in.

French Drain Required: Linear feet

Date: 5-6-04

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

Signed: Joe Weathers Environmental Health Specialist



STUB Out Plumbing shallow where shown (Ground level or higher) And Pump may not be needed. meet onsite. MAY be able to switch to 25% reduction SYSTEM & MAY not need Pump. If using chamber must place gravel along side chamber

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 # 2171. 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 Danny Norris Telephone # _____

Address _____

1141

Property Location SR# _____ Road Name _____
Highland Forest 52 3(48x49) .40 AC
Subdivision Lot # # Bedrooms Proposed Lot Size

TYPE OF SYSTEM

New Installation [] Repair Septic Tank Nitrification Lines
[] Conventional Other Prop to Conv.
[] Basement [] With Plumbing [] Without Plumbing

Water Supply: [] Well Public Water Supply Minimum Well Setback: 50 Ft.
Septic Tank 1000 gal Pump Chamber 1000 gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 3 Length of lines 70 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.

Signature of Authorized Agent for Harnett County Joe West RS Date 05-10-04