

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) Jerry Roach New Installation Septic Tank
Property Location: SR# 1128 Danock Rd. Repairs Nitrification Line

Subdivision Little River Plantation Lot # 101

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: TWO Lot Size: _____

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 _____

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

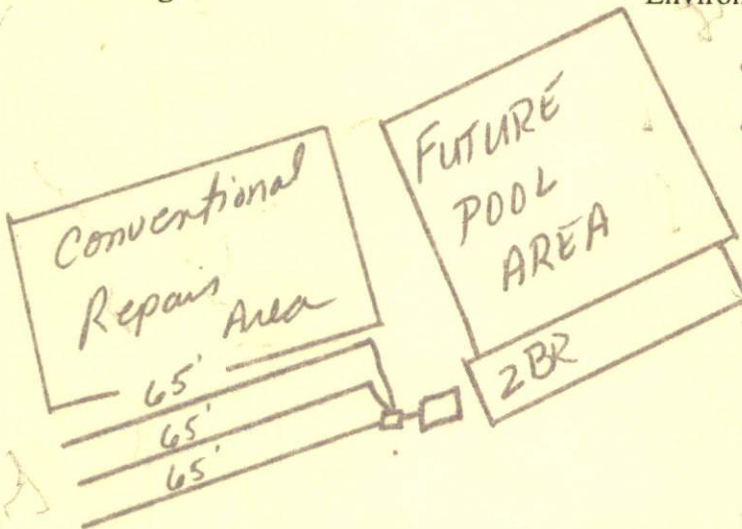
Subsurface Drainage Field No. of 3 exact length 65 width of 3 depth of 18-24
ditches of each ditch ft. ditches ft. ditches in.

French Drain Required: _____ Linear feet

Date: 27 July 1999

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

Signed: Vernest R. Lodge
Environmental Health Specialist



maintain setbacks
 & lines or contours
 & markers & filter
 required
 & contractor must
 meet on-site
 prior to installation.

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 # 15696. 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.

Owner or Authorized Agent _____ 245-4610
Name: Jerry Roach Telephone # 396-8641
Address: 4917 Marks Rd. Cameron, NC
Property Location: SR # 1128 Road Name Danoch
New Installation Repair _____ Septic Tank Nitrification Lines
Subdivision Little River Plantation Lot # 101
Number of Bedrooms Proposed: TWO Lot size: _____
Basement _____ With Plumbing _____ Without Plumbing _____
Water Supply: Well _____ Public Minimum Well Setback: 50 ft.
Type of System: Conventional Other _____
Tank Volume: Septic Tank 1000 gallons Pump Chamber _____ gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 3 Length of lines 65 feet
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.

Authorized Agent for Harnett County Health Department

Name: Vincent R. [Signature] Date: 27 July 99