

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) Edwin Chapel Church☐ New Installation☐ Septic TankProperty Location: SR# Edwin Chapel Church Rd 2011☒ Repairs☒ Nitrification Line

Subdivision _____ Lot # _____

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 2 Lot Size: _____Basement with Plumbing: ☐ Garage: ☐Water Supply: ☐ Well ☒ Public ☐ CommunityDistance From Well: 50' ft.

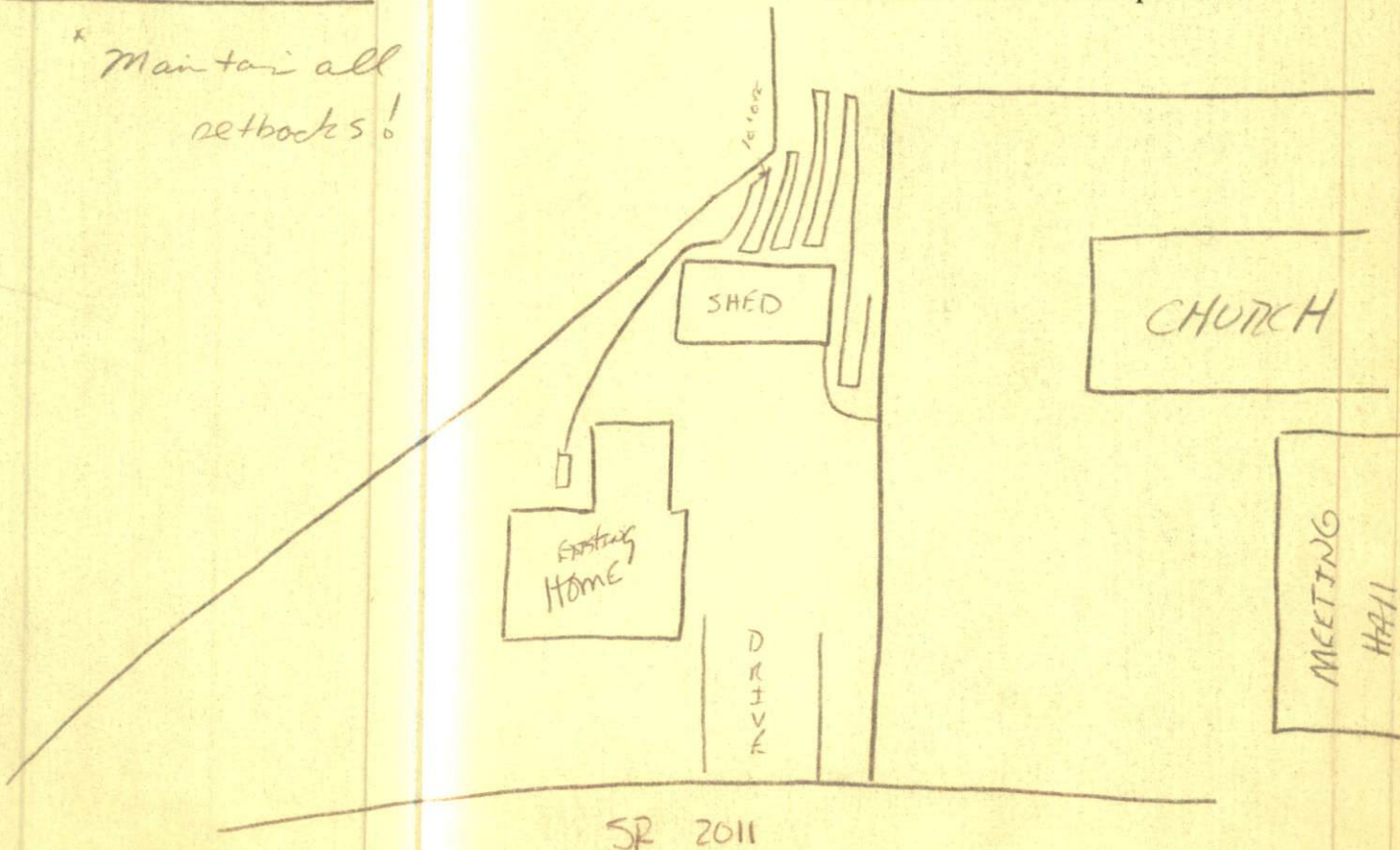
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: ☒ Conventional ☐ Other _____Size of tank: Septic Tank: 1500 gallons Pump Tank: _____ gallonsSubsurface No. of exact length width of depth of
Drainage Field ditches 1 of each ditch 300 ft. ditches 3 ft. ditches 18-20 in.French Drain Required: — Linear feetDate: 11-3-00

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

Signed: James E. Markant, M.S.
Environmental Health Specialist

* Maintain all setbacks!



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 # 17493. 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 _____

Name: Erwin Chapel Church Telephone # 817-5962

Address: Erwin Chapel Church Rd Erwin N.C. 28339

Property Location: SR # 2011 Road Name Erwin Chapel Church Rd

New Installation ☒ Repair ☐ Septic Tank ☒ Nitrification Lines ☒

Subdivision _____ Lot # _____

Number of Bedrooms Proposed: 2 Lot size: 1 acre +-

Basement ☐ With Plumbing ☐ Without Plumbing ☐

Water Supply: Well ☒ Public ☒ Minimum Well Setback: 50' ft.

Type of System: Conventional ☒ Other ☐

Tank Volume: Septic Tank Existing gallons Pump Chamber _____ gallons

Nitrification Field Specifications

Number of fields 2 Number of Lines per Field 1 Length of lines 300

Width of ditches 3 ft. Depth of ditches 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.

Authorized Agent for Harnett County Health Department

Name: James E. Marshall D.R.S. Date: 11-3-00