

IMPROVEMENT PERMIT

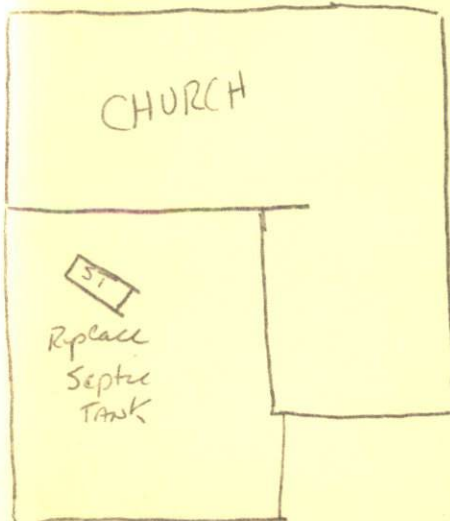
Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department."

Name: (owner) Erwin Chapel Church☐ New Installation☐ Septic TankProperty Location: SR# Erwin Chapel Church Rd☒ Repairs☐ Nitrification LineSubdivision Lot # Tax ID # Quadrant # Number of Bedrooms Proposed: Lot Size: 3 Acre +-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 NEW TANKSize of tank: Septic Tank: 1200 gallons Pump Tank: gallonsSubsurface No. of exact length width of depth of
Drainage Field ditches of each ditch ft. ditches ft. ditches in.French Drain Required: Linear feet

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

Date: 3-28-00Signed: James E. Martin
Environmental Health Specialist

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 # 17110. 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 # _____

Address: _____

Property Location: SR # 2009 Road Name Erwin Chapel Church Rd

New Installation ☒ Repair ☐ Septic Tank ☒ Nitrification Lines ☒

Subdivision _____ Lot # _____

Number of Bedrooms Proposed: _____ Lot size: _____

Basement _____ With Plumbing _____ Without Plumbing _____

Water Supply: Well ☒ Public ☐ Minimum Well Setback: _____ ft.

Type of System: Conventional ☒ Other ☐ NEW TANK ONLY

Tank Volume: Septic Tank 1200 gallons Pump Chamber _____ gallons

Nitrification Field Specifications

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

Width of ditches 1 ft. Depth of ditches 1 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: Jane E. Mather Date: 3-28-00