

# 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) Daniel L Howell Jr

New Installation     Septic Tank

Property Location: SR#  Hwy 27

Repairs     Nitrification Line

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_

Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed:  3  Lot Size:  3.79 acres

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  FEE-222 LAY TOWNS-SS-312

Size of tank: Septic Tank:  Existing  gallons    Pump Tank: \_\_\_\_\_ gallons

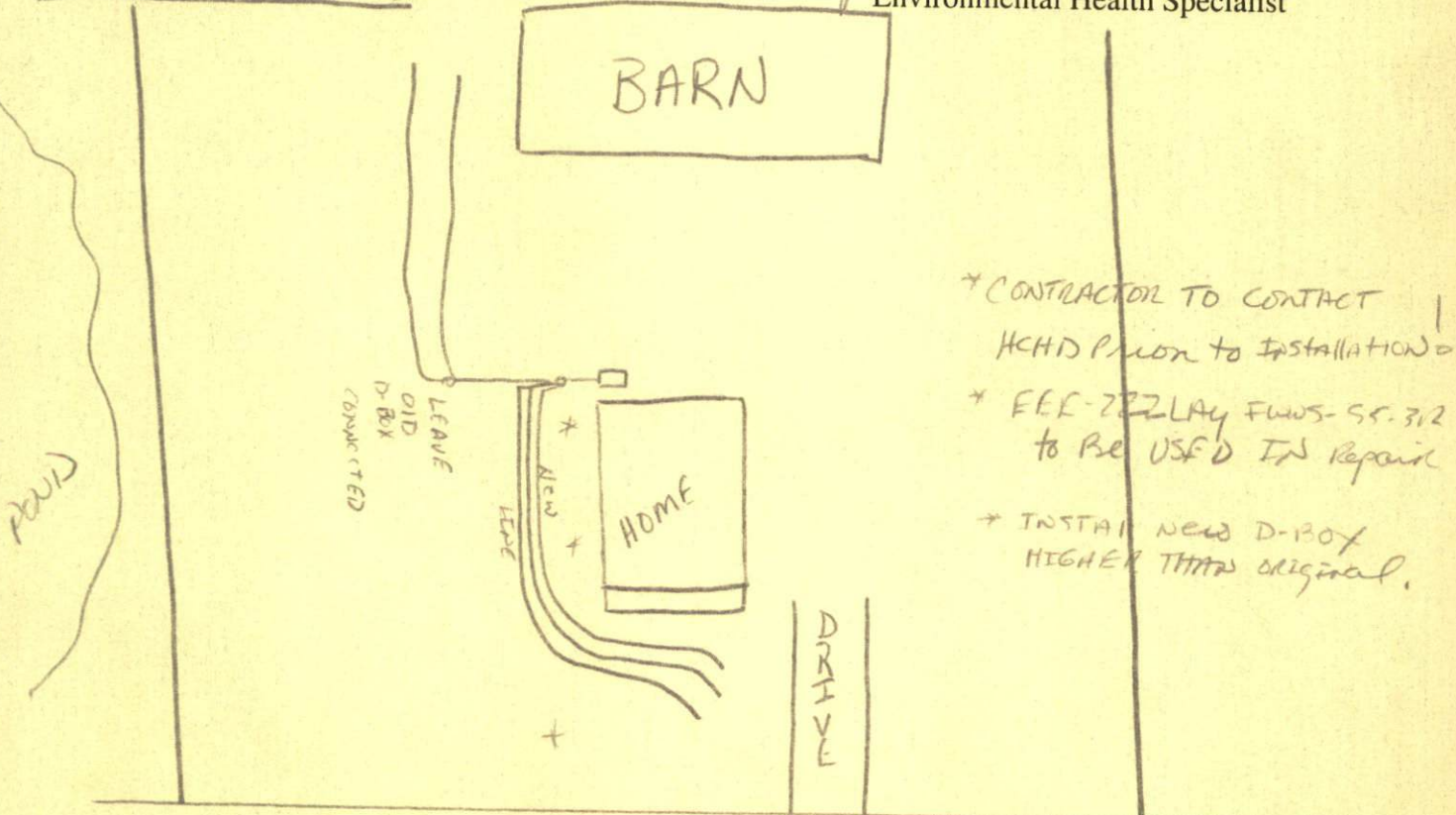
Subsurface Drainage Field: No. of ditches  3  exact length of each ditch  75  ft. width of ditches  3  ft. depth of ditches  18-20  in.

French Drain Required: \_\_\_\_\_ Linear feet

Date:  3-1-01

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

Signed:  James C Marshall III R.S.   
Environmental Health Specialist



- \* CONTRACTOR TO CONTACT HCHD prior to installation
- \* FEE-222 LAY TOWNS-SS-312 TO BE USED IN REPAIR
- \* INSTALL NEW D-BOX HIGHER THAN ORIGINAL.

N.C. Hwy 27

01 20000393

# 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 # 16880. 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: DANIEL E HOWELL JR Telephone # 207-1494

Address: 8697 P.C. 27 EAST COATS P.C. 27521

Property Location: SR # Ham 27 Road Name 27

New Installation  Repair  Septic Tank  Nitrification Lines

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_

Number of Bedrooms Proposed: 3 Lot size: 3.79

Basement  With Plumbing  Without Plumbing

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

Type of System: Conventional  Other  EFF-222LAY

Tank Volume: Septic Tank 675 gallons Pump Chamber \_\_\_\_\_ gallons

### Nitrification Field Specifications

Number of fields  Number of Lines per Field 3 Length of lines 75

Width of ditches 3 ft. Depth of ditches 18-20 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. Manha Date: 3-1-01