

01-20000394

HARNETT COUNTY HEALTH DEPARTMENT

No 17582

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) Lester Coats

New Installation Septic Tank

Property Location: SR# _____

Repairs Nitrification Line

Subdivision Chicora County Club Lot # 1B+2B

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 4 Lot Size: 380 x 300

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50 ft.

4/24/10

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

Type of system: Conventional Other Polystyrene Aggregate Trench System I WWS-95-2R

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

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 400 ft. width of ditches 3 ft. depth of ditches 18-24 in.

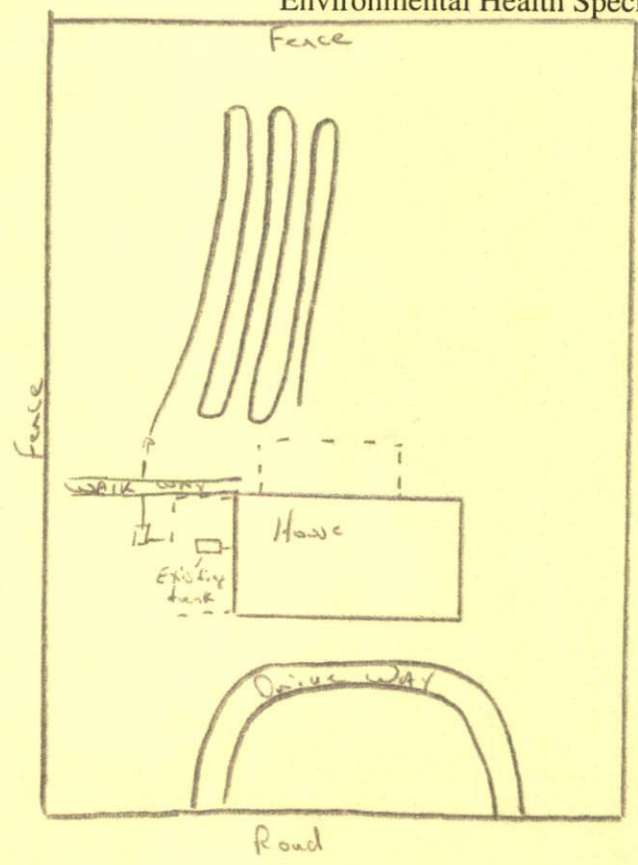
French Drain Required: _____ Linear feet

Date: 3/14/2001

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

Signed: Dwight M. Lewis R.S.
Environmental Health Specialist

*Maintain setbacks
* If full can not be achieved a pump will be required



HA RNETT 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 # 17582. 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: Lester Coats Telephone # 897-7583

Address: 300 Chicora Club Dr. Dunn, N.C. 28934

Property Location: SR # 1775 Road Name Chicora

New Installation _____ Repair Septic Tank _____ Nitrification Lines

Subdivision Chicora Club Lot # 1B + 2B

Number of Bedrooms Proposed: 4 Lot size: 380' x 300'

Basement _____ With Plumbing _____ Without Plumbing _____

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

Type of System: Conventional _____ Other Polystyrene Aggregate Trench System IWW 1-95-32

Tank Volume: Septic Tank 1000 gallons Pump Chamber 1000 gallons
if needed

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 1 Length of lines 400ft.

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: Bryan M. Lewis R.S. Date: 3/14/2001