

# 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) Paul Barber

New Installation  Septic Tank

Property Location: SR# 1403 HC Road

Repairs  Nitrification Line

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

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

Number of Bedrooms Proposed: 3 Lot Size: 5.95 acre

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 SEE-222 LAY LINES-95-312

Size of tank: Septic Tank: 1400 gallons Pump Tank: Paul Pumpette Co gallons 145-35195

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. 1/14/15

French Drain Required: - Linear feet

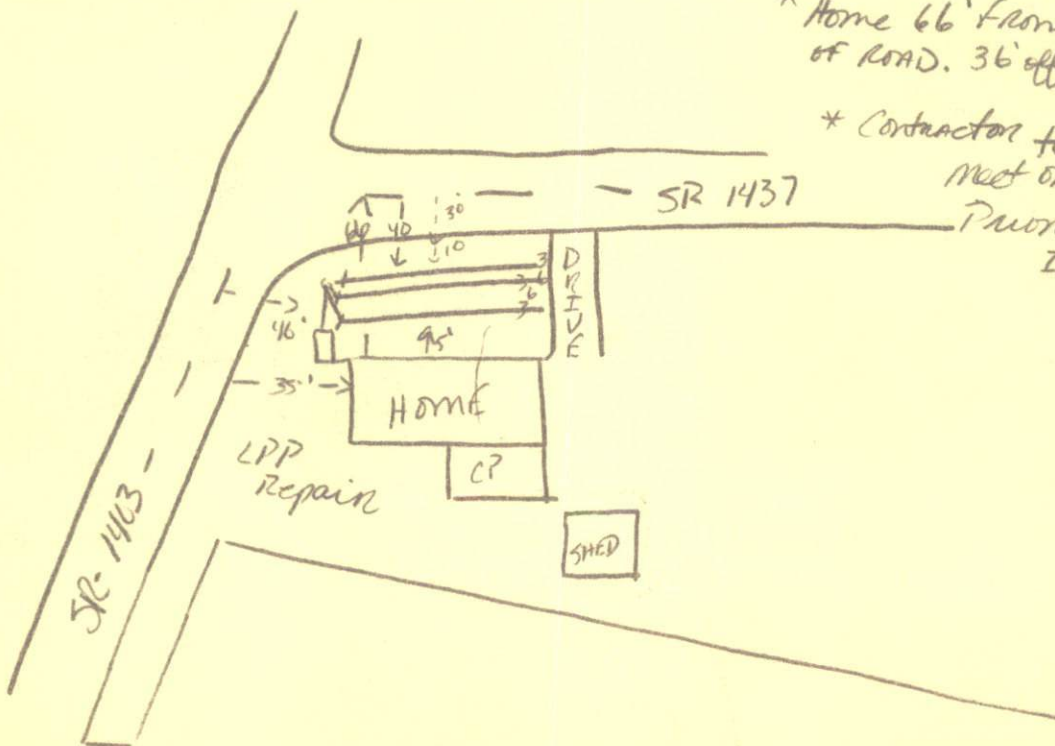
Date: 6-23-99

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

Signed: James E. Markant Esq.  
Environmental Health Specialist

\* Home 66' from center of ROAD. 36' off property LINE.

\* Contractor to meet on SITE Prior to Installation!



**HARNETT COUNTY HEALTH DEPARTMENT  
AUTORIZATION TO CONSTRUCT**

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 13523. 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: Paul Barbou Telephone # 552-3665

Address: P.O. BOX 1129 F.V. N.C. 27520

Property Location: SR # 1403 Road Name Harnett Central

New Installation  Repair  Septic Tank  Nitrification Lines

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

Number of Bedrooms Proposed: 3 Lot size: 5.95

Basement \_\_\_\_\_ With Plumbing \_\_\_\_\_ Without Plumbing \_\_\_\_\_

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

Type of System: Conventional  Other  EEF-202 Lay

Tank Volume: Septic Tank 1000 gallons Pump Chamber \_\_\_\_\_ gallons

**Nitrification Field Specifications**

Number of fields 2 Number of Lines per Field 3 Length of lines 75

Width of ditches 3 ft. Depth of ditches 18-30 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. Merchant Date: 6-23-99