

HTE _____

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) William Jerry Johnson New Installation Septic Tank
 Property Location: SR# Hwy 301 N Repairs Nitrification Line

Subdivision _____ Lot # _____

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 2 Lot Size: 15 acres

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: _____ 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: Fasten gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 250 ft. width of ditches 3 ft. depth of ditches 24" → 18" in.

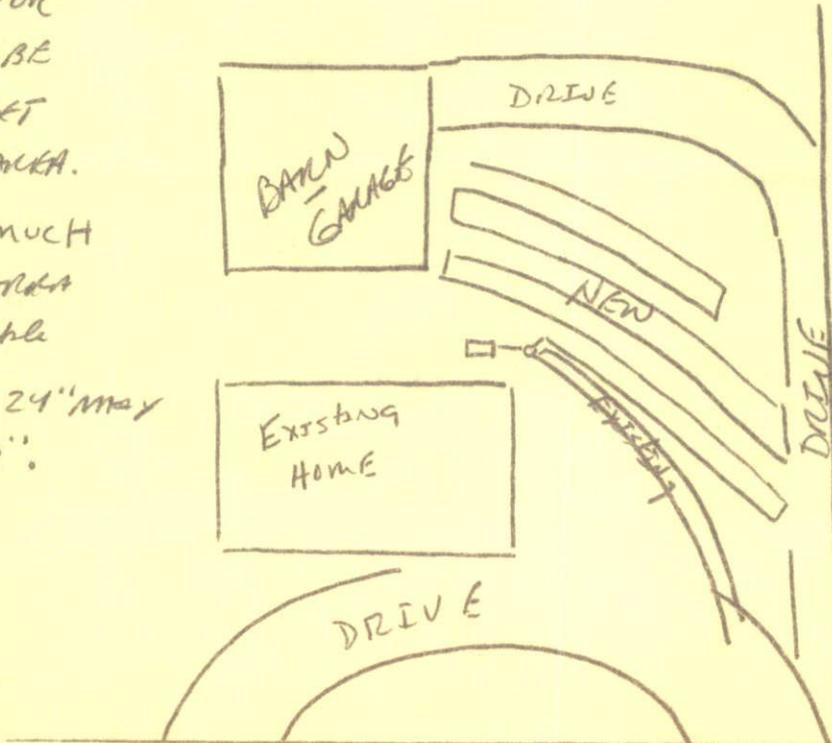
French Drain Required: _____ Linear feet

Date: 6-8-04

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

Signed: James E. Markham
 Environmental Health Specialist

*Contractor
 may NOT BE
 able to GET
 250' IN AREA.
 RUN AS MUCH
 LINE IN AREA
 AS POSSIBLE
 START AT 24" MAY
 GO TO 18".



US Hwy 301 N

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH
AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 20628. 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.*

Name William Jerry Johnson Telephone # 910 892-4811

Address 3397 US 301 NORTH P.O. BOX 1456 DONN N.C.

Property Location SR# Hwy 301 Road Name 301

Subdivision _____ Lot # 2 # Bedrooms Proposed 154 Lot Size

TYPE OF SYSTEM

- New Installation Repair Septic Tank Nitrification Lines
- Conventional Other _____
- Basement With Plumbing Without Plumbing

Water Supply: Well Public Water Supply Minimum Well Setback: _____ Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 1 Length of lines 250 Ft.

Width of ditches 3 ft. Depth of ditches 24" → 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.

James E. Moulton
Signature of Authorized Agent for Harnett County

6-8-04
Date