

IMPROVEMENT PERMIT

22186

HTE _____

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) STEVE + CHERZY DEVANE

- New Installation
- Septic Tank
- Repairs
- Nitrification Line

Property Location: SR# Hwy 82

Subdivision _____ Lot # _____

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 3600GPD Lot Size: 1.6 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 Pump to 25% reduction system Manure

Size of tank: Septic Tank: Existing gallons Pump Tank: 1000 gallons

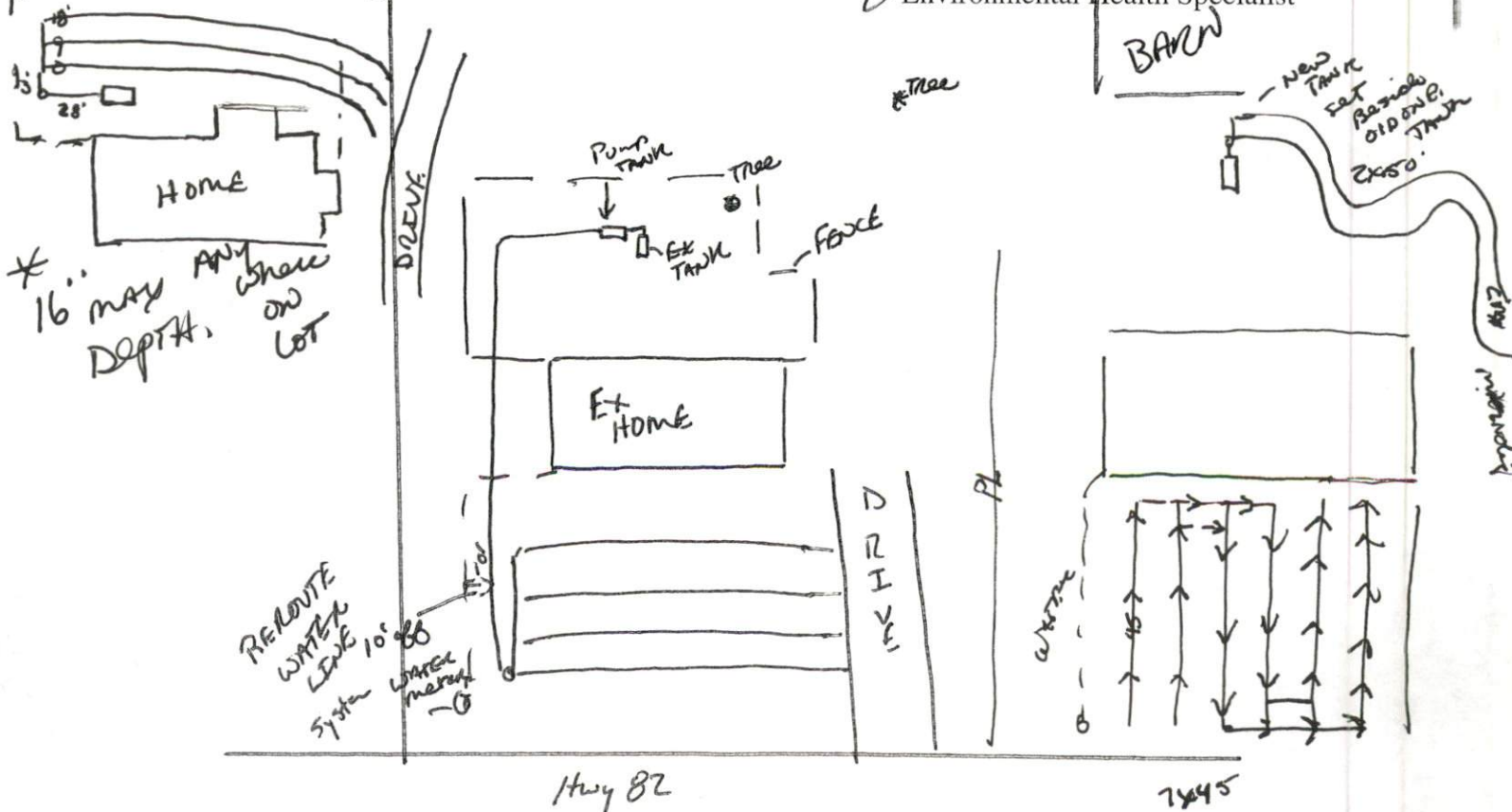
Subsurface Drainage Field No. of ditches 4 exact length of each ditch 60 ft. width of ditches 3 ft. depth of ditches max 14-16 in.

French Drain Required: - Linear feet

Date: 8- -05

Signed: James E. Markant
Environmental Health Specialist

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



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 # 22186. 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 STEVE + CHERRY DEVANE Telephone # 910-892-2920

Address 3898 NC 82 DUNN N.C. 28534

Property Location SR# Hwy 82 Road Name 82

Subdivision _____ Lot # _____ # Bedrooms Proposed 3 360 GPD Lot Size 1.6

TYPE OF SYSTEM

- New Installation Repair Septic Tank Nitrification Lines
- Conventional Other Pump to 25% Reduction System "MANITSE"
- Basement With Plumbing Without Plumbing

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

Septic Tank 60 gal Pump Chamber 1000 gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 4 Length of lines 60 Ft.

Width of ditches 3 ft. Depth of ditches 14-216 max 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. Merchant
Signature of Authorized Agent for Harnett County

8-12-05
Date