

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) Terry Robinson / Transferred to Scott Napers 10-23-96 New Installation Septic Tank
 Property Location: SR# 1268 Repairs Nitrification Line

Subdivision _____ Lot # 1

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 5.39 ac.

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 100 min 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 conv. lines

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

Subsurface Drainage Field No. of ditches 4 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain required: _____ Linear feet

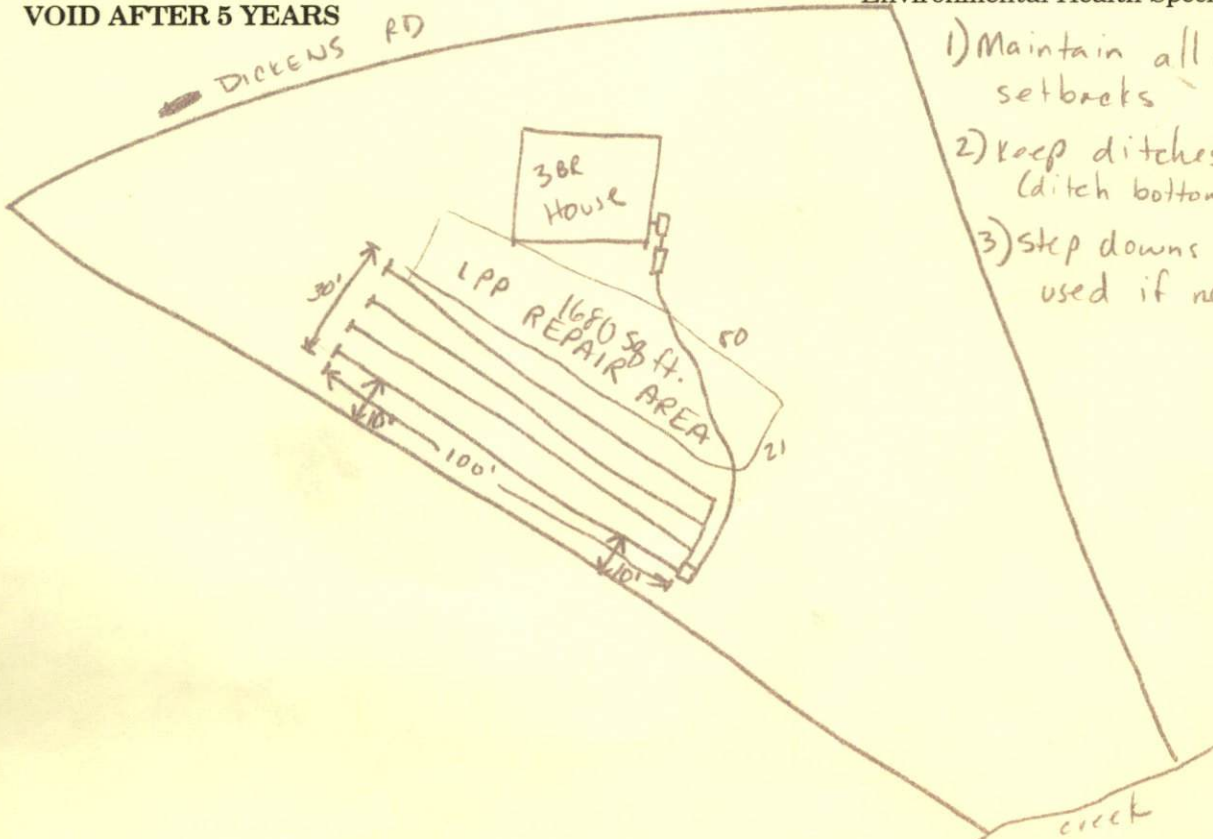
This permit is subject to revocation if site plans or intended use change.

Date: 5/8/96

Signed: Pat A Babe

Environmental Health Specialist

NOT TO SCALE
VOID AFTER 5 YEARS



- 1) Maintain all required setbacks
- 2) keep ditches level (ditch bottoms level)
- 3) step downs may be used if necessary

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 # 09483. 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: Terry Robinson Telephone # 258-5790

Address: P.O. Box 615 Broadway, NC 27505

Property Location: SR # 1268 Road Name Dickens Rd.

New Installation Repair Septic Tank Nitrification Lines

Subdivision _____ Lot # 1

Number of Bedrooms Proposed: 3 Lot size: 5.39 ac.

Basement With Plumbing Without Plumbing

Water Supply: Well Public Minimum Well Setback: 100+ ft.

Type of System: Conventional Other Pump to conv. lines

Tank Volume: Septic Tank 1000 gallons Pump Chamber 1000 gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 4 Length of lines 100'

Width of ditches 3 ft. Depth of ditches 8-24 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: Pat A Bube Date: 5/8/96

HARNETT COUNTY HEALTH DEPARTMENT

AUTHORIZATION TO CONSTRUCT

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Transferred from Terry Robinson

Owner or Authorized Agent Same

Name: Scott Nabers Telephone # (919) 774-3808

Address: 1913 Tramway Rd. Sanford N.C. 27330

Property Location: SR# 1268 Road Name Dickens Rd.

New Installation [checked] Repair [] Septic Tank [checked] Nitrification Lines [checked]

Subdivision NA Lot # []

Number of Bedrooms Proposed: 3 Lot Size: 5.39 A

Basement [] With Plumbing [] Without Plumbing []

Water Supply: Well [] Public [checked]

Minimum Well Setback: 50 ft. min.

Type of System: Conventional [] Other [checked] Pump to Conventional Lines

Tank Volume: Septic Tank 1000 gallons, Pump Chamber 1000 gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines Per Field 4 Length of Lines 100

Width of Ditches 3 ft. Depth of ditches 18-24 inches

French Drain: Linear feet required [] Depth of gravel []

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Authorized Agent of Harnett County Health Department

Name: [Signature] Date: 10-23-96