

HARNETT COUNTY HEALTH DEPARTMENT

HTE _____

IMPROVEMENT PERMIT

21745

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 J. Sparks

New Installation Septic Tank

Property Location: SR# FF 82 J.R. Wilson Ln

Repairs Nitrification Line

Subdivision _____ Lot # 63464

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: Existing Lot Size: _____

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 _____

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

Subsurface No. of exact length width of depth of
Drainage Field ditches 6 of each ditch 50 ft. ditches 3 ft. ditches 2430 in.

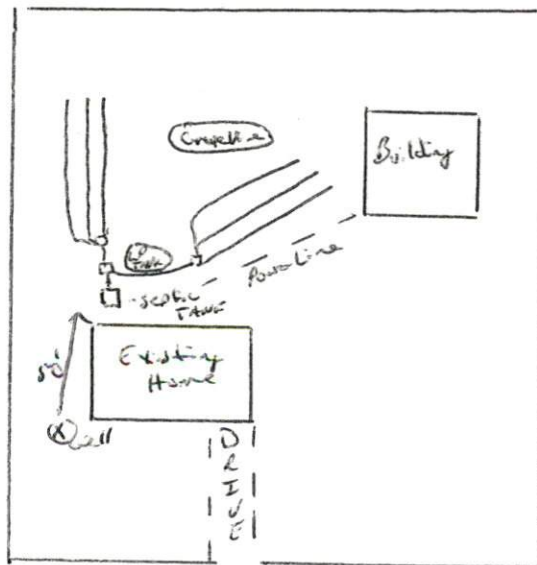
French Drain Required: _____ Linear feet

Date: 4/17/2005

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

Signed: [Signature]
Environmental Health Specialist

- * Maintain all setbacks
- * Replace old D-Box with New, from it set 2 New D-Boxes with 3 lines each



J.R. Wilson Ln.

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 # 21745. 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 J. Sparks Telephone # 488-928 ext. 5370

Address 185 J.R. Wilson Ln Dumfries, VA 22024

Property Location SR# off 82 Road Name J.R. Wilson

Subdivision _____ Lot # 6764 # Bedrooms Proposed 3 existing Lot Size .92Ac

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: 50 Ft.

Septic Tank Existing gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 6 Length of lines 50 Ft.

Width of ditches 3 ft. Depth of ditches 24.30 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.

[Signature]
Signature of Authorized Agent for Harnett County

4/14/2005
Date