

Replace Permit # 09875

IMPROVEMENT PERMIT

No 13291-13 for site B

Be it ordained by the Harnett County Board of Health as follows: Section II, 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) SAMUEL & BECKY SWLIK New Installation Septic Tank
Property Location: SR# 1107 Repairs Nitrification Line

Subdivision SAMUEL & BECKY SWLIK Lot #
Tax ID # Quadrant #

Number of Bedrooms Proposed: 3 Lot Size: 1.50 AC

Basement with Plumbing: Garage: NOTE The House for site B
Water Supply: Well Public Community must be 124' from Iron at
Distance From Well: 50 min ft. the Road - ^{House} Marked with Red Flags

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: 1000 gallons Pump Tank: gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 200 ft. width of ditches 3 ft. depth of ditches 18-24 in.

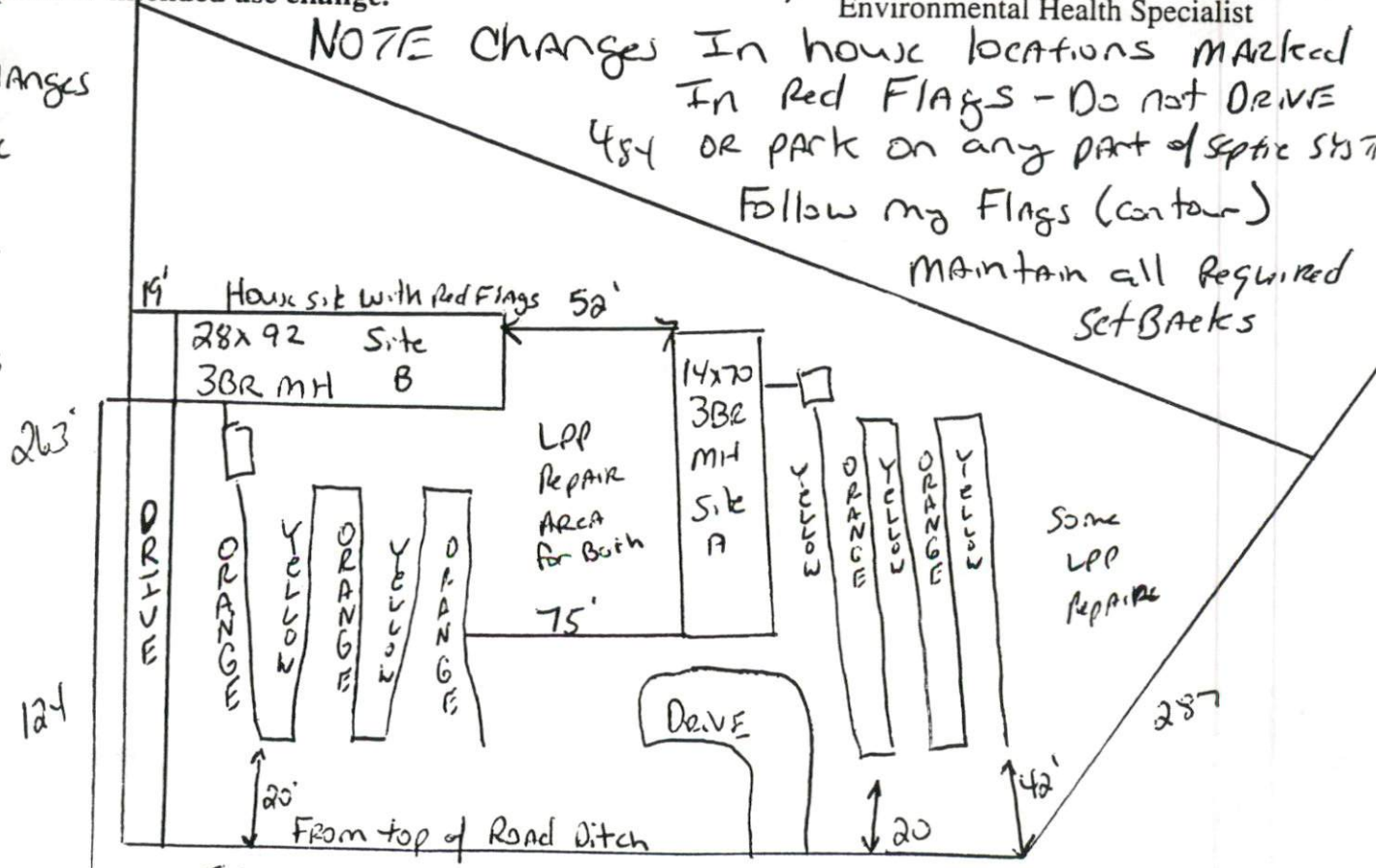
French Drain Required: Linear feet

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

Date: 1-13-98
Signed: Joe W. ...
Environmental Health Specialist

NOTE CHANGES IN house & DRIVE locations IF NOT located AS shown This permit IS VOID

NOTE CHANGES In house locations MARKED IN Red Flags - Do not DRIVE 484 OR PARK on any part of septic system Follow my Flags (contour) MAINTAIN all Required Setbacks



Must meet on site

AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 13291 B. 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 Samuel & Becky Suslik

Name: _____ Telephone # _____

Address: _____

Property Location: SR # _____ Road Name _____

New Installation Repair _____ Septic Tank Nitrification Lines

Subdivision Samuel & Becky Suslik Lot # _____

Number of Bedrooms Proposed: 3 Lot size: 1.50 AC

Basement _____ With Plumbing _____ Without Plumbing _____

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

Type of System: Conventional Other _____

Tank Volume: Septic Tank 1000 gallons Pump Chamber _____ gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 1 Length of lines 200

Width of ditches 3 ft. Depth of ditches 18-24 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: Joe W. [Signature] Date: 1-13-98