

# 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) Sadie Barnett  New Installation  Septic Tank  
 Property Location: SR# 1443 Lafayette Rd.  Repairs  Nitrification Line  
 Subdivision \_\_\_\_\_ Lot # 1 *\* Attempt to repair*

Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: Existing Lot Size: \_\_\_\_\_

Basement with Plumbing:  Garage:

Water Supply:  Well  Public  Community

Distance From Well: 50 min 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

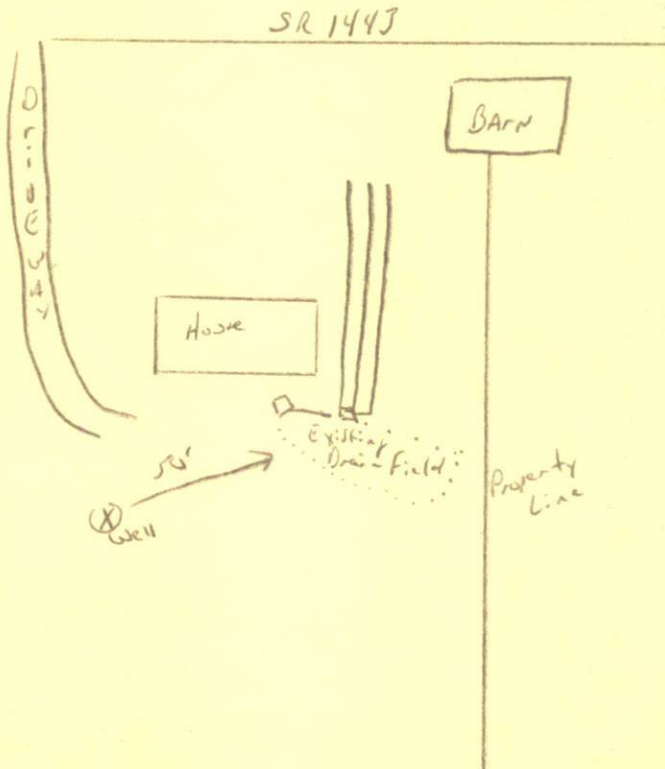
Subsurface No. of exact length width of depth of  
 Drainage Field ditches 3 of each ditch 80 ft. ditches 3 ft. ditches 30-18 in.

French Drain Required: \_\_\_\_\_ Linear feet

Date: 4/9/2003  
 Signed: Bryan McSwain R.S.  
 Environmental Health Specialist

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

- \* Maintain all setbacks
- \* Reroute water line if necessary to maintain 10 ft. setback
- \* Start ditches at 30 inches run to 18 inches
- \* Use stepdowns if needed
- \* Do NOT drive on drain lines



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 # 2022. 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 Jadie Barnett Telephone# 919-552-6057

Address 19 Mary Lee Lane Foyoy Virginia NC 27526

Property Location SR# 1443 Road Name Lafayette

Subdivision \_\_\_\_\_ Lot # 1 # Bedrooms Proposed 3 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: 50 Ft.

Septic Tank Existing gal Pump Chamber \_\_\_\_\_ gal

**NITIRFICATION FIELD SPECIFICATIONS**

Number of fields 1 # of lines per field 3 Length of lines 80 Ft.

Width of ditches 3 ft. Depth of ditches 30-18 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.

Signature of Authorized Agent for Harnett County of Harnett Bryan McSwain E.S. Date 4/9/2007