

HTE \_\_\_\_\_

## IMPROVEMENT PERMIT

21612

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) LULA ATKINS☐ New Installation☐ Septic TankProperty Location: SR# 421 LAMM AVE☒ Repairs☒ Nitrification LineSubdivision Churchland Estates Lot # 10

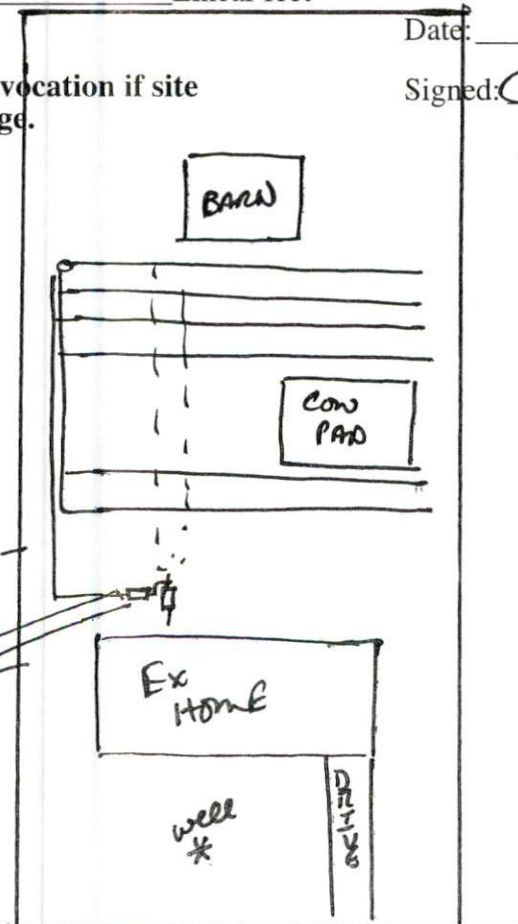
Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 2 Lot Size: 80' x 256Basement with Plumbing: ☐ Garage: ☐Water Supply: ☒ Well ☒ Public ☐ CommunityDistance 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 Prop to ConventionalSize of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallonsSubsurface No. of exact length width of depth of  
Drainage Field ditches 5 of each ditch 60 ft. ditches 3 ft. ditches 18 in.French Drain Required: - Linear feetDate: 2-2-05

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

Signed: James E. Manfalone  
Environmental Health Specialist

LAMM AVE

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 # 21612. 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.*

LUIA ATKINS 892-5774  
Name Telephone #

75 Lamm Ave Brown N.C. 28339  
Address

421 421  
Property Location SR# Road Name

Chancellor Estate 10 2 80' x 256  
Subdivision Lot # # Bedrooms Proposed Lot Size

**TYPE OF SYSTEM**

☒ New Installation ☐ Repair ☒ Septic Tank ☐ Nitrification Lines  
☐ Conventional ☒ Other Prop to Conventional  
☐ Basement ☐ With Plumbing ☐ Without Plumbing

Water Supply: ☐ Well ☒ Public Water Supply Minimum Well Setback: \_\_\_\_\_ Ft.

Septic Tank 1000 gal Pump Chamber \_\_\_\_\_ gal

**NITRIFICATION FIELD SPECIFICATIONS**

Number of fields 2 # of lines per field 5 Length of lines 60 Ft.

Width of ditches 3 ft. Depth of ditches 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.

James E. Mankin  
Signature of Authorized Agent for Harnett County

2-2-05  
Date