

HARNETT COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT

12

11833

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) Timothy W. Neighbors

☒ New Installation

☒ Septic Tank

Property Location: SR# 2032

☐ Repairs

☒ Nitrification Line

Byrd Rd.

Subdivision _____ Lot # 3

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 7.44 AC.

Basement with Plumbing: ☐

Garage: ☐

Water Supply: ☐ Well ☒ Public

☐ Community

Distance From Well: 750 ft. from well next door

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: 900 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 2 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18 in.

French Drain Required: _____ Linear feet

Date: 4-6-97

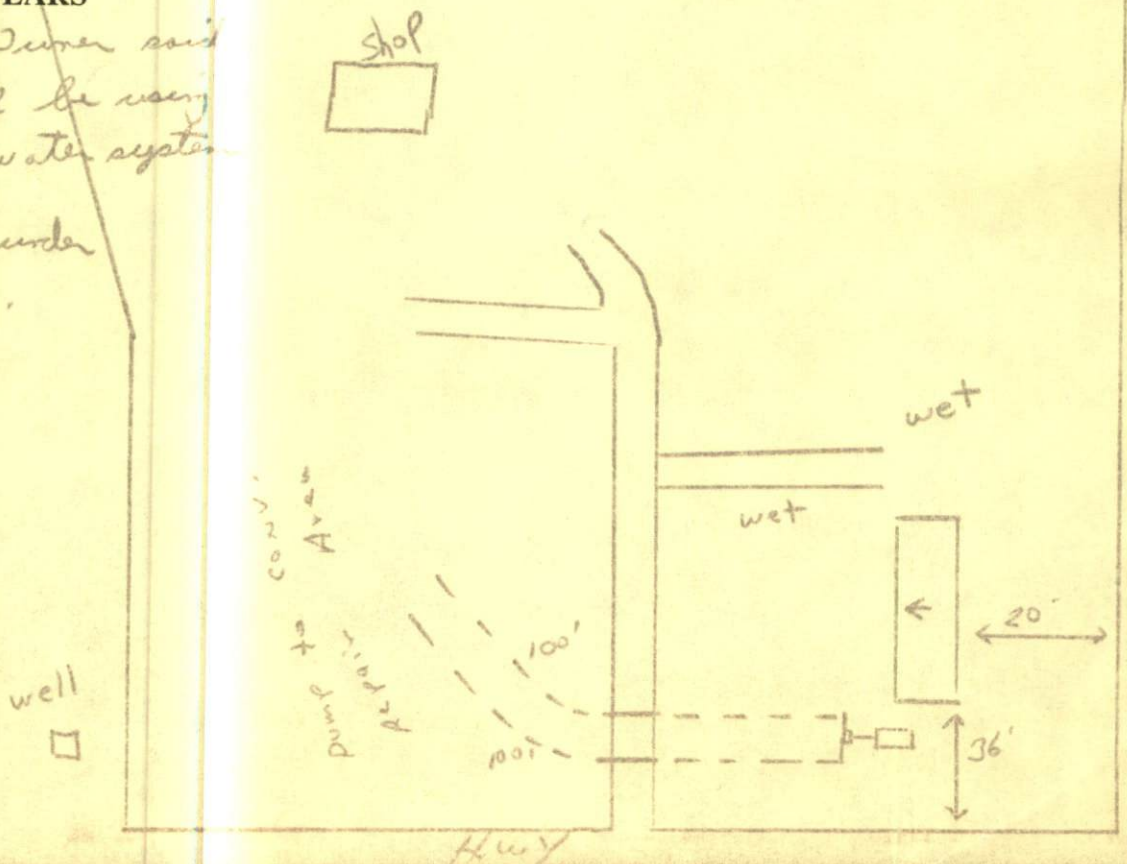
This permit is subject to revocation if site plans or intended use change.

Signed: [Signature]
Environmental Health Specialist

VOID AFTER 5 YEARS

note: owner said he will be using county water system

Hard line under drive way.



**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 # 11833. 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 Timothy W. Neighbor

Name: _____ Telephone # 897-5255

Address: Rt. 1 Box 90-B Bunnlevel

Property Location: SR # 2032 Road Name Byrd Rd.

New Installation ☒ Repair ☐ Septic Tank ☒ Nitrification Lines ☒

Subdivision J.W. Byrd DOH Lot # 3

Number of Bedrooms Proposed: 3 Lot size: 7.44 AC.

Basement ☐ With Plumbing ☐ Without Plumbing ☐

Water Supply: Well ☐ Public ☒ Minimum Well Setback: _____ ft.

Type of System: Conventional ☒ Other ☐

Tank Volume: Septic Tank 900 gallons Pump Chamber _____ gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 2 Length of lines 200

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.

Authorized Agent for Harnett County Health Department

Name: Jeff Eudy Date: 4-6-97