

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) Dorothy P. Farrell☒ New Installation☒ Septic TankProperty Location: SR# 1559☐ Repairs☐ Nitrification LineSubdivision W.M. Pope Lot # 1

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 2 3 Lot Size: 33.05Basement 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 _____Size of tank: Septic Tank: 1500 gallons Pump Tank: _____ gallons

Subsurface No. of 2 exact length 125' width of _____ depth of _____
 Drainage Field ditches 2 of each ditch 150 ft. ditches 3 ft. ditches 18-20 in.

French Drain Required: _____ Linear feet

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

Date: 3-24-97Signed: James E. Markert E.H.S.

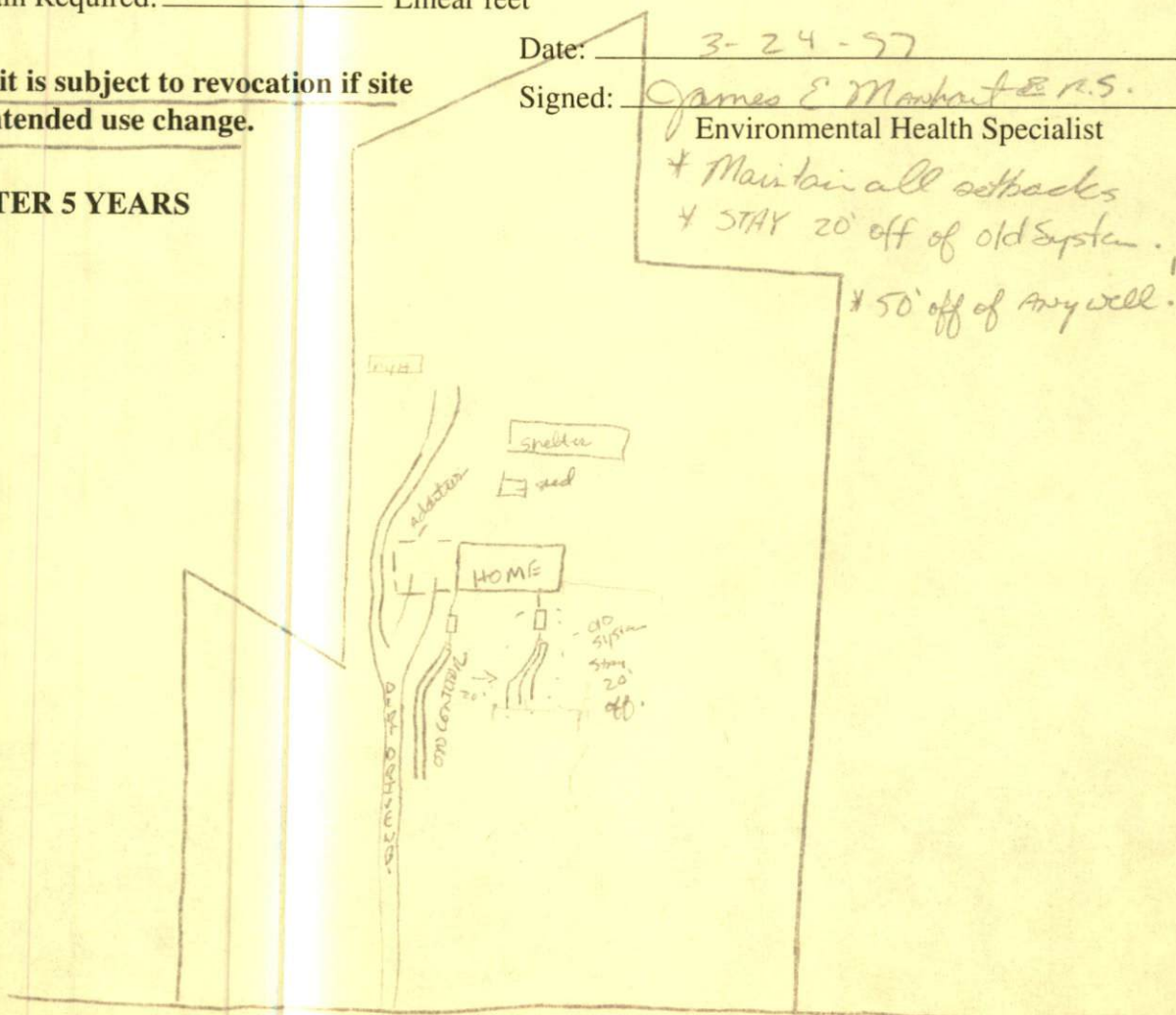
Environmental Health Specialist

* Maintain all setbacks

* STAY 20' off of old system.

* 50' off of any well.

VOID AFTER 5 YEARS



**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 # 11780. 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 Dorothy P Fenell

Name: Dorothy P Fenell Telephone # 894-5273

Address: RT 2 BOX 495 Coats N.C. 27521

Property Location: SR # 1559 Road Name DIXON

New Installation ☒ Repair ☐ Septic Tank ☒ Nitrification Lines ☒

Subdivision W. M. Pope Lot # 1

Number of Bedrooms Proposed: 3 or 3 Lot size: 33.05

Basement ☐ With Plumbing ☐ Without Plumbing ☐

Water Supply: Well ☒ Public ☐ Minimum Well Setback: 50 ft. ^{100 if possible}

Type of System: Conventional ☒ Other ☐

Tank Volume: Septic Tank 1000 gallons Pump Chamber ☐ gallons

Nitrification Field Specifications

Number of fields 2 Number of Lines per Field 2 Length of lines 125-150

Width of ditches 3 ft. Depth of ditches 18-20 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: James E. Markant R.S. Date: 3-24-97