

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) Mary Tillman☒ New Installation☒ Septic TankProperty Location: SR# off 1120 Overhills Rd.☐ Repairs☐ Nitrification LineSubdivision Anderson EstatesLot # 71472

Tax ID # _____

Quadrant # _____

Number of Bedrooms Proposed: 4

Lot Size: _____

Basement with Plumbing: ☐Garage: ☐Water Supply: ☐ Well☒ Public☐ CommunityDistance 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 Polystyrene Aggregate Trench System IWW-95-3RSize of tank: Septic Tank: 1000 gallons

Pump Tank: _____ gallons

Subsurface

No. of

exact length

width of

depth of

Drainage Field

ditches 1of each ditch 300 ft.ditches 3 ft.ditches 12 max in.

French Drain Required: _____ Linear feet

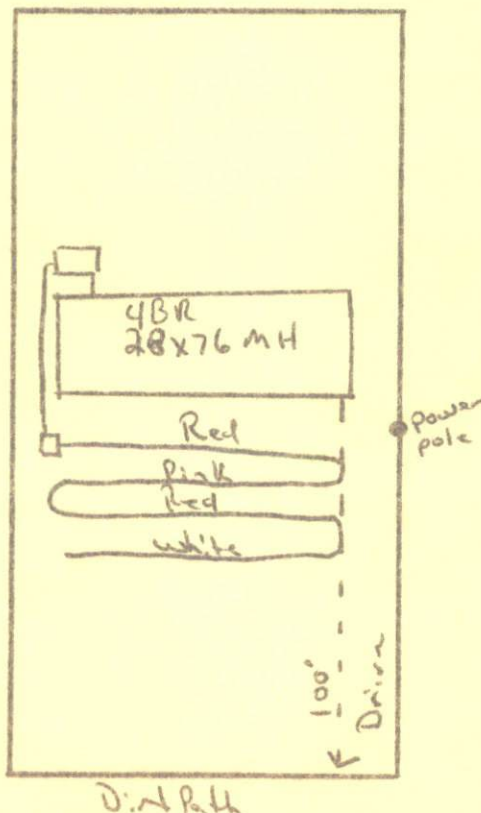
Date: 7/21/98

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

Signed: Bryan McSwain R.S.

Environmental Health Specialist

- * Maintain all required setbacks
- * Only have to be 5ft from property lines due to date property was checked
- * Contractor must meet onsite prior to installation of system
- * 6 inches of cover must be placed on top of system



AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 14470. 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 _____

Name: Mary Tillman Telephone # 396-8906
488-9140

Address: 932 Country Club Dr 126 Fayetteville NC 28301

Property Location: SR # off 1120 Road Name off Ozark Hills

New Installation ☒ Repair ☐ Septic Tank ☒ Nitrification Lines ☒

Subdivision Anderson Estates Lot # 71472

Number of Bedrooms Proposed: 4 Lot size: _____

Basement ☐ With Plumbing ☐ Without Plumbing ☐

Water Supply: Well ☐ Public ☒ Minimum Well Setback: 50 ft.

Type of System: Conventional ☐ Other ☒ Polystyrene Aggregate Trench System
I WWS-95-3R

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 300 Ft

Width of ditches 3 ft. Depth of ditches 12 max 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: Bryan McSwain R.S. Date: 7/21/98