

## 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) Deborah Klemenko ☒ New Installation ☒ Septic Tank  
Property Location: SR# 1213 Buic ☐ Repairs ☒ Nitrification Line

Subdivision Kevin & Deborah Klemenko Lot # —

Tax ID # — Quadrant # —

Number of Bedrooms Proposed: 4 (28x70) Lot Size: 5.0 AC

Basement with Plumbing: ☐ Garage: ☒ This permit Replace

Water Supply: ☐ Well ☒ Public ☐ Community # 16411

Distance 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: 1000 gallons Pump Tank: — gallons

Subsurface No. of exact length width of depth of  
Drainage Field ditches 5 of each ditch 130 ft. ditches 3 ft. ditches 18 in. <sup>MAX</sup>

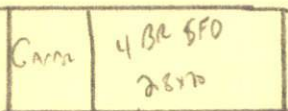
French Drain Required: — Linear feet

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

Date: 10-27-99

Signed: Joe W. Arri  
Environmental Health Specialist

Drive



MUST

meet on site

18" max Ditch Depth

STUB out Plumbing

Shallow

Do not Drive or pack on

Septic System

**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 # 16411. 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 Deborah Klement

Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

Address: \_\_\_\_\_

Property Location: SR # 1213 Road Name \_\_\_\_\_

New Installation ☒ Repair \_\_\_\_\_ Septic Tank ☒ Nitrification Lines ☒

Subdivision Kevin & Deborah Klement Lot # \_\_\_\_\_

Number of Bedrooms Proposed: 4 (28x70) Lot size: 5.0 Ac

Basement \_\_\_\_\_ With Plumbing \_\_\_\_\_ Without Plumbing \_\_\_\_\_

Water Supply: Well \_\_\_\_\_ Public ☒ Minimum Well Setback: \_\_\_\_\_ ft.

Type of System: Conventional ☒ Other \_\_\_\_\_

Tank Volume: Septic Tank 1000 gallons Pump Chamber \_\_\_\_\_ gallons

**Nitrification Field Specifications**

Number of fields 1 Number of Lines per Field 5 Length of lines 130

Width of ditches 3 ft. Depth of ditches 18<sup>max</sup> 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: [Signature] Date: 10-27-99