

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) Kimberly Loomis ☒ New Installation ☐ Septic Tank
Property Location: SR# 1106 - Hillman Grove Rd. ☐ Repairs ☐ Nitrification Line
27W to Hillman Grove Rd. 60 2 1/2 miles turn R on Gainsborough At end on C
Subdivision — Lot # —
Tax ID # 9554 85 3948 Quadrant # 09-9554-0046
Number of Bedrooms Proposed: 3 Lot Size: 16 acres
Basement with Plumbing: NO ☐ Garage: ☐
Water Supply: ☒ Well ☐ Public ☐ Community
Distance From Well: 2100 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: 21000 gallons Pump Tank: — gallons
Subsurface No. of exact length width of depth of
Drainage Field ditches 3 of each ditch 67 ft. ditches 3 ft. ditches 18 in.
French Drain Required: — Linear feet

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

Date: 8/28/98
Signed: Vernice R. Hall 08/28/98
Environmental Health Specialist

See attached plot plan dated 8/28/98 for system location and additional specifications

HARNETT COUNTY HEALTH DEPARTMENT
AUTORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 15031. 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 Kimberly Loomis

Name: Kimberly Loomis Telephone # 910-944-6002

Address: 302 W. Maple Ave. Aberdeen, NC 28315

Property Location: SR # 1106 Road Name Hillman Grove Rd.

New Installation ☒ Repair ☐ Septic Tank ☐ Nitrification Lines ☐

Subdivision NONE Lot # N/A

Number of Bedrooms Proposed: 3 Lot size: 16 acres

Basement NO 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 N/A gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 3 Length of lines 67'

Width of ditches 3 ft. Depth of ditches 18 inches

French Drain: Linear feet required N/A Depth of gravel N/A

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: Vernice H. Wolf Date: 8/28/98