

Replaces  
#16098

HARNETT COUNTY HEALTH DEPARTMENT

No 13735

IMPROVEMENT PERMIT

40000057

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) Shannon Bogart  New Installation  Septic Tank  
Property Location: SR# 1100 Line Road  Repairs  Nitrification Line  
Mersaicks Lane To the end Turn Left - End of the Road  
Subdivision Weswood IV Lot # 20

Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 3 (14x76) Lot Size: 10.02 ac

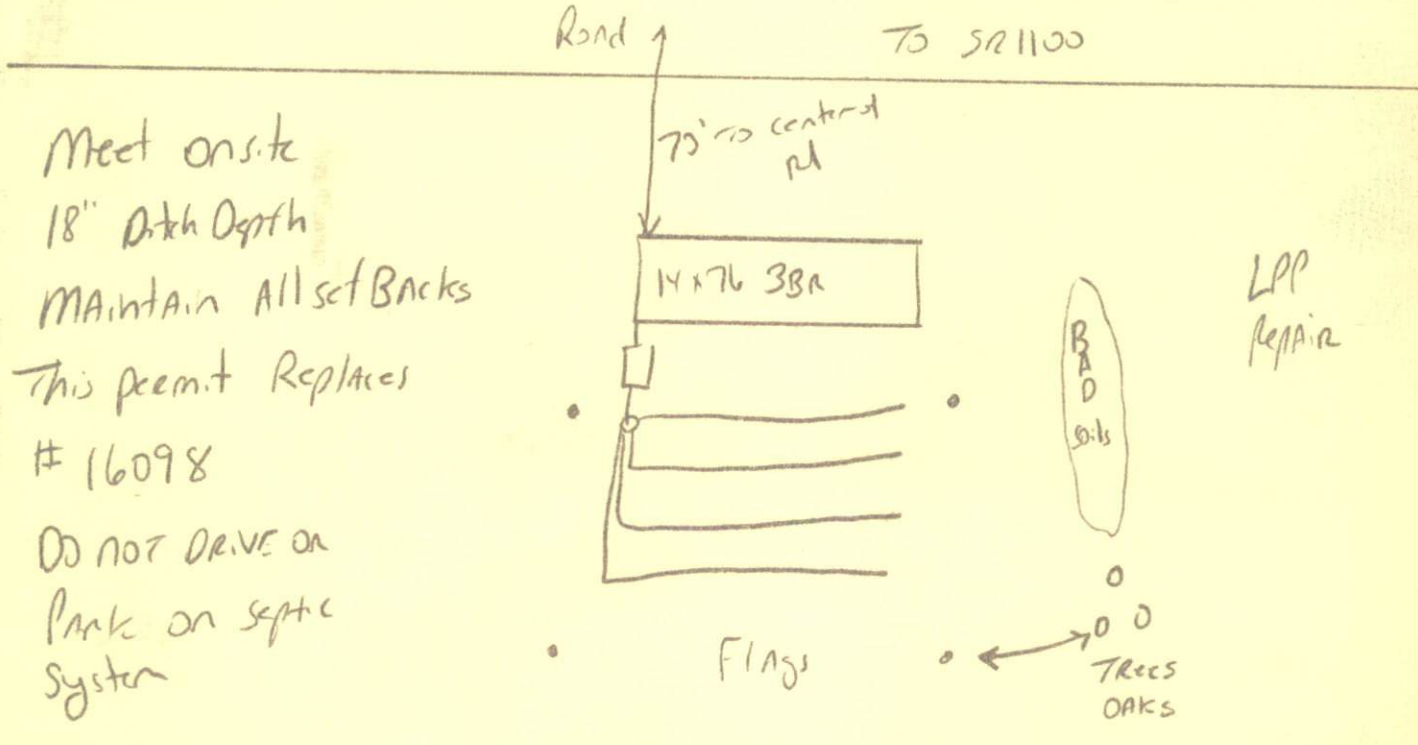
Basement with Plumbing:  Garage:  MUST use filter  
Water Supply:  Well  Public  Community MUST use marker  
Distance From Well: 100 ft. \* MUST meet on site \*

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 Drainage Field No. of ditches 4 exact length of each ditch 60 ft. width of ditches 3 ft. depth of ditches 18 in. MAX  
French Drain Required: \_\_\_\_\_ Linear feet

Date: 02-09-2000  
Signed: J. Waters  
Environmental Health Specialist

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



Meet on site  
18" Ditch Depth  
MAintain All set Backs  
This permit Replaces  
#16098  
DO NOT DRIVE ON  
Park on septic  
System

LPP  
Repair

BAD  
soils

Trees  
OAKS

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 # 13735. 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 Shannon Bogart

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

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

Property Location: SR # 1100 Road Name \_\_\_\_\_

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

Subdivision Westwood IV Lot # 20

Number of Bedrooms Proposed: 3 (14x76) Lot size: 10.02 Ac

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

Water Supply: Well  Public \_\_\_\_\_ Minimum Well Setback: 100 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 4 Length of lines 60

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: [Signature] Date: 02-09-2000