

00-40000165

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) David M Knight

New Installation Septic Tank

Property Location: SR# 1491 Clover Ridge Rd.

Repairs Nitrification Line

Subdivision Neils Creek Farms Lot # 135

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 1.397 Ac

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance 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 _____

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 3 exact length of each ditch 135 ft. width of ditches 3 ft. depth of ditches 12-18 in. *

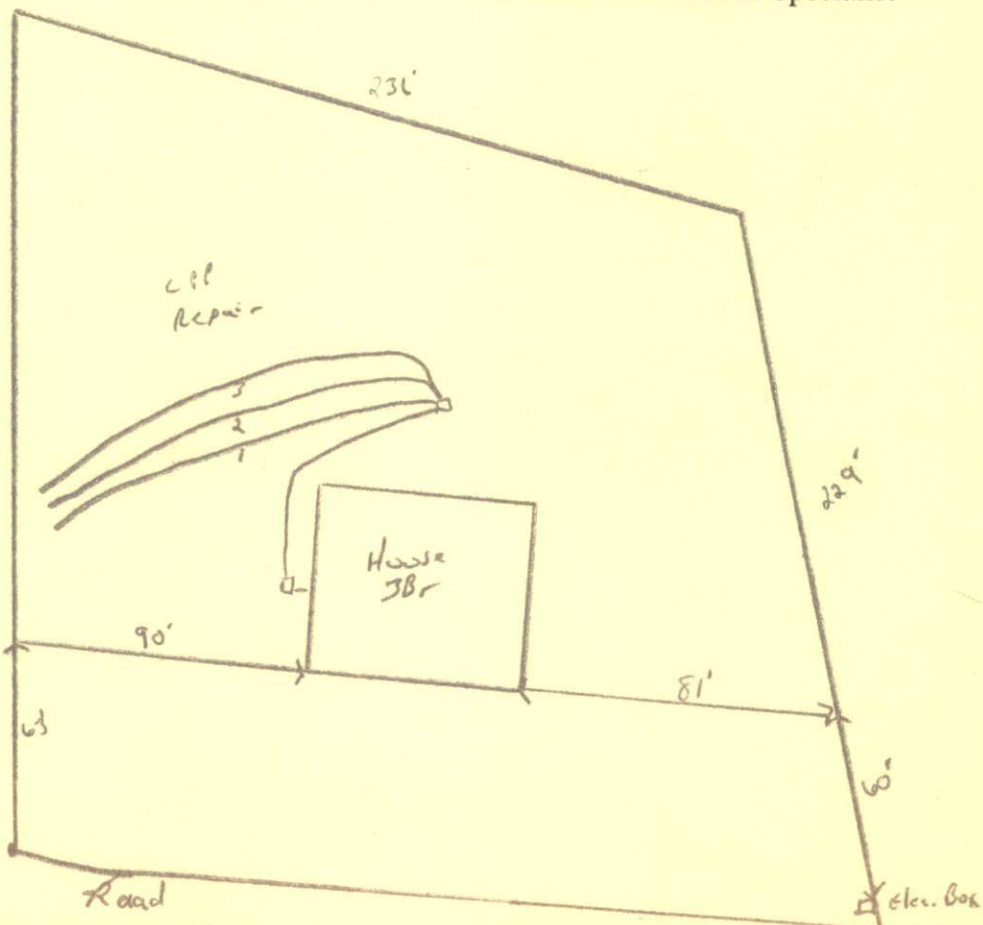
French Drain Required: _____ Linear feet

Date: 3/7/2006

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

Signed: Bryan M Swain R.S.
Environmental Health Specialist

- * Maintain setbacks
- * Tank & lines must be 15 ft. from house
- * Run lines on contour
- * 1 & 2 lines install at 18 inches MAX
- * 3 line install at 12" & 6 inches of cover must be placed on the line
- * Contractor to call prior to installing system



HARNETT COUNTY HEALTH DEPART NT
AUTH IZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 13788. 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: David McKnight Telephone # 893-8049

Address: P.O. Box 201 Buies Creek NC 27506

Property Location: SR # 1491 Road Name Claver Ridge

New Installation Repair Septic Tank Nitrification Lines

Subdivision Neill's Creek Farms Lot # 135

Number of Bedrooms Proposed: 3 Lot size: 1.397 Ac

Basement With Plumbing Without Plumbing

Water Supply: Well Public Minimum Well Setback: 50 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 3 Length of lines 135 ft.

Width of ditches 3 ft. Depth of ditches 12-18 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: Bryan McSwain R.S. Date: 3/17/2000