

00-011307

# IMPROVEMENT PERM...

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) Robert McLamb  New Installation  Septic Tank  
Property Location: SR# 2021 Titan Roberts  Repairs  Nitrification Line

Subdivision \_\_\_\_\_ Lot # 8

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

Number of Bedrooms Proposed: FOUR Lot Size: \_\_\_\_\_

Basement with Plumbing:  Garage:

Water Supply:  Well  Public  Community

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 Polystyrene Trench Aggregate System <sup>Inj 95-3R</sup>

Size of tank: Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

Subsurface Drainage Field No. of ditches 3 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 24 in.

French Drain Required: \_\_\_\_\_ Linear feet

Date: St. Patrick's Day 2009

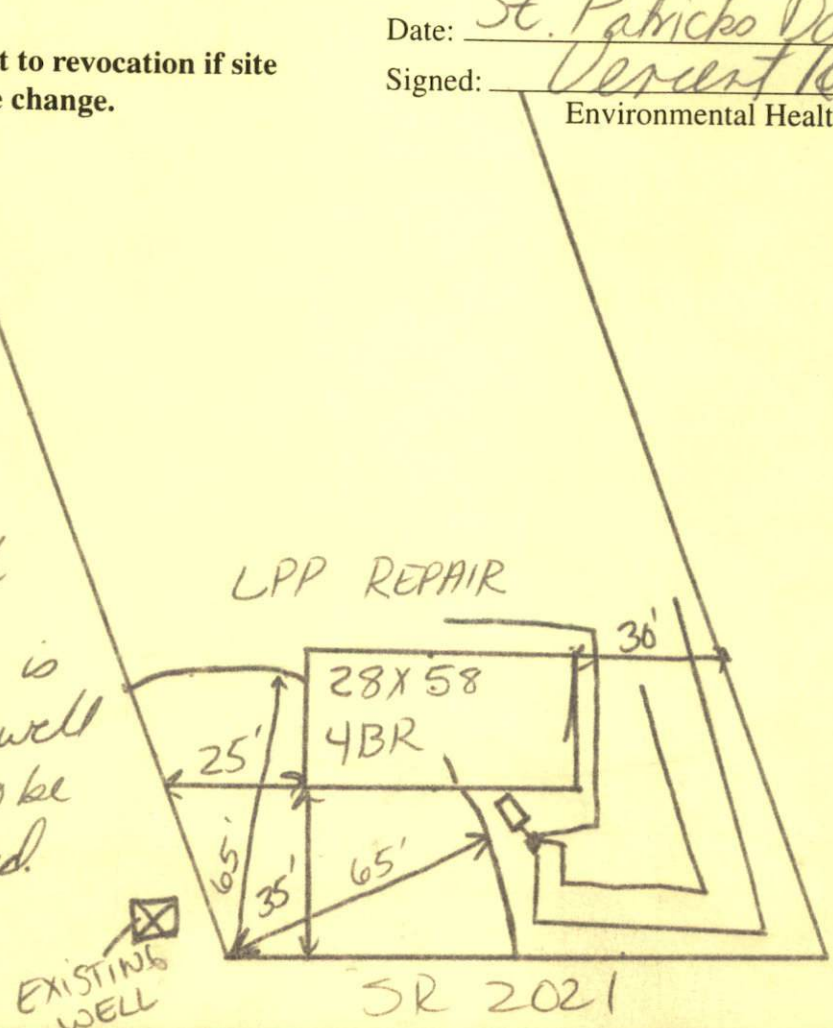
Signed: Vernon R. Dodge  
Environmental Health Specialist

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

1"=40'

Keep tank and lines 65' from front left corner for well setback

When repair is needed, the well will need to be relocated.





**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 # 17155. 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: Robert McLamb Telephone # 892-2911

Address: 112 First Street Erwin, NC

Property Location: SR # 2021 Road Name Titan Robert

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

Subdivision \_\_\_\_\_ Lot # 8

Number of Bedrooms Proposed: FOUR Lot size: \_\_\_\_\_

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

Water Supply: Well  Public \_\_\_\_\_ Minimum Well Setback: 50 ft.

Type of System: Conventional \_\_\_\_\_ Other Polystyrene Trench Aggregate IWA 5-95-3R

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 100 feet

Width of ditches 3 ft. Depth of ditches 24 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: St. Patrick's Day 2000

(Revised 2/96) CNSTRCT.WPD