

# 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) Gary DANIEL Adcock  New Installation  Septic Tank  
Property Location: SR# 1448 ATKINS  Repairs  Nitrification Line

Subdivision JB Wells Lot # 3

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

Number of Bedrooms Proposed: 3 Lot Size: 1.843 acre

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 \_\_\_\_\_

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 18-22 in.

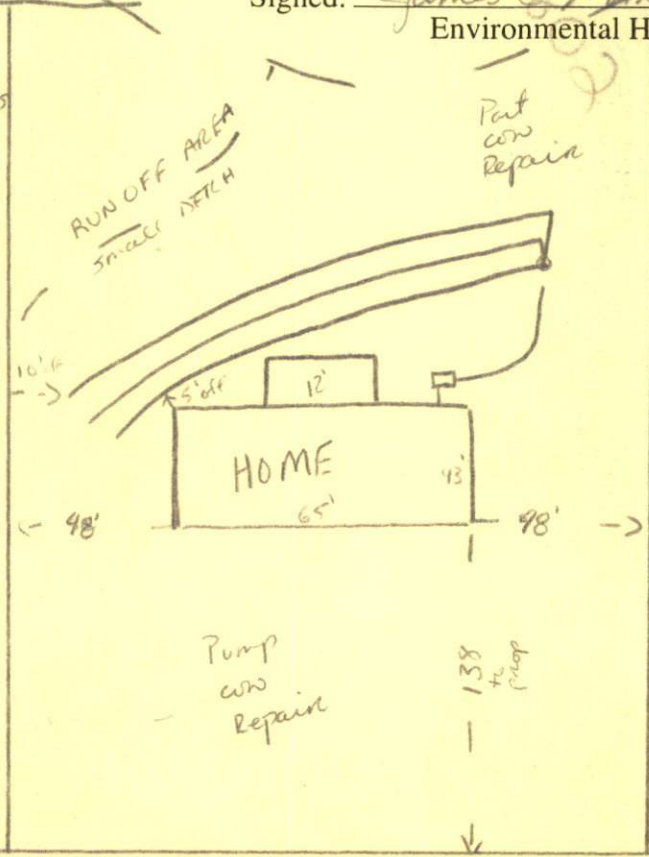
French Drain Required: - Linear feet

Date: 8-14-00

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

Signed: James E. Mantel III R.S.  
Environmental Health Specialist

\*<sup>x</sup> Maintain all setbacks  
\* Home to Be Built where stated!



SR 1448

ATKINS

# 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 # 17467. 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: Bary DANIEL Adcock Telephone # 919-639-8719

Address: P.O. BOX 1051 Fuquay Varina N.C. 27526

Property Location: SR# 1448 Road Name ATKINS

New Installation  Repair  Septic Tank  Nitrification Lines

Subdivision JB Wells Lot # 3

Number of Bedrooms Proposed: 3 Lot size: 1.843

Basement  With Plumbing  Without Plumbing

Water Supply: Well  Public  Minimum Well Setback: 50' ft.

Type of System: Conventional  Other

Tank Volume: Septic Tank 1600 gallons Pump Chamber \_\_\_\_\_ gallons

### Nitrification Field Specifications

Number of fields 2 Number of Lines per Field 3 Length of lines 100

Width of ditches 3 ft. Depth of ditches 18-22 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: James C. Markhart III RS. Date: 8-15-00