

IMPROVEMENT PERMIT

03-5-6721

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) Sandra Knight☒ New Installation☒ Septic TankProperty Location: SR# 1278 Lee G Line rd☐ Repairs☒ Nitrification LineWhit Field LaneSubdivision James Whit FieldLot # 2

Tax ID # _____

Quadrant # _____

Number of Bedrooms Proposed: 2 (14x80)Lot Size: 10.01 AcBasement with Plumbing: ☐Garage: ☐Water Supply: ☐ Well☒ Public☐ CommunityDistance 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 FieldNo. of
ditches 1exact length
of each ditch 270 ft.width of
ditches 3 ft.depth of
ditches 1824 in.

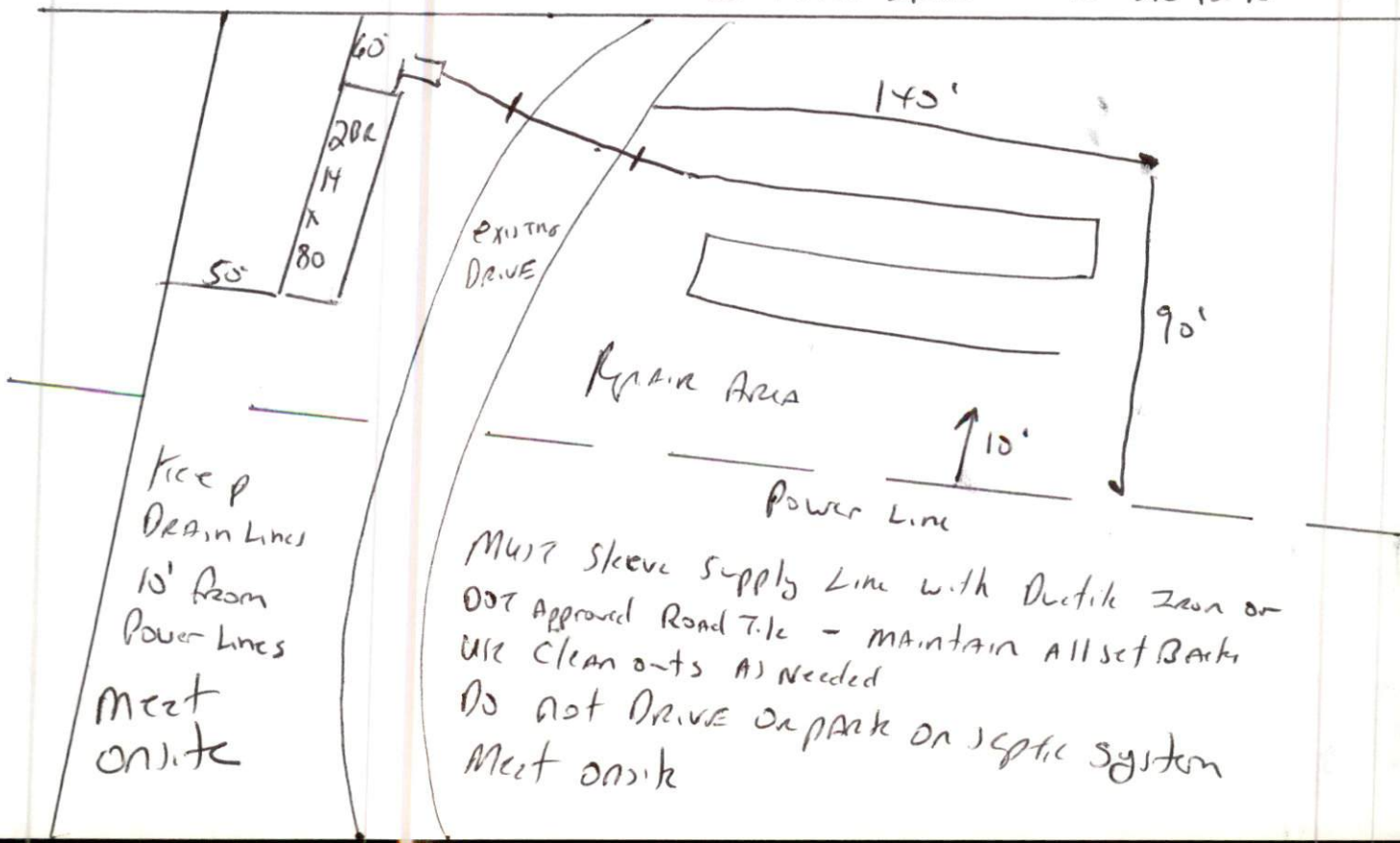
French Drain Required: _____ Linear feet

Date: 04-01-03

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

Signed: Jo L. W. W.

Environmental Health Specialist

Whit Field Lane to SR 1278 →

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 # 19294. 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.

Name Sander Knight Telephone# 258-3737

Address _____

Property Location SR# 1278 Road Name _____
Jones Whitefield 2 2 (14x80) 10.0702
Subdivision Lot # # Bedrooms Proposed Lot Size

TYPE OF SYSTEM

☒ New Installation ☐ Repair ☒ Septic Tank ☒ Nitrification Lines
☒ Conventional ☐ Other _____

☐ Basement ☐ With Plumbing ☐ Without Plumbing

Water Supply: ☐ Well ☒ Public Water Supply Minimum Well Setback: 50 Ft.
Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 270 Ft.

Width of ditches 3 ft. Depth of ditches 18.21 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.

Signature of Authorized Agent for Harnett County of Harnett

Date

Joe White

04-01-03