

IMPROVEMENT PERMIT

03-5-7547

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) Pine Grove Dev
 Property Location: SR# Nc 24/27

New Installation Septic Tank
 Repairs Nitrification Line

Subdivision Wood Bridge Lot # 11

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (27x76) Lot Size: .46 Ac

Basement with Plumbing: Garage: note changes in house location
 Water Supply: Well Public Community
 Distance From Well: 50 ft.

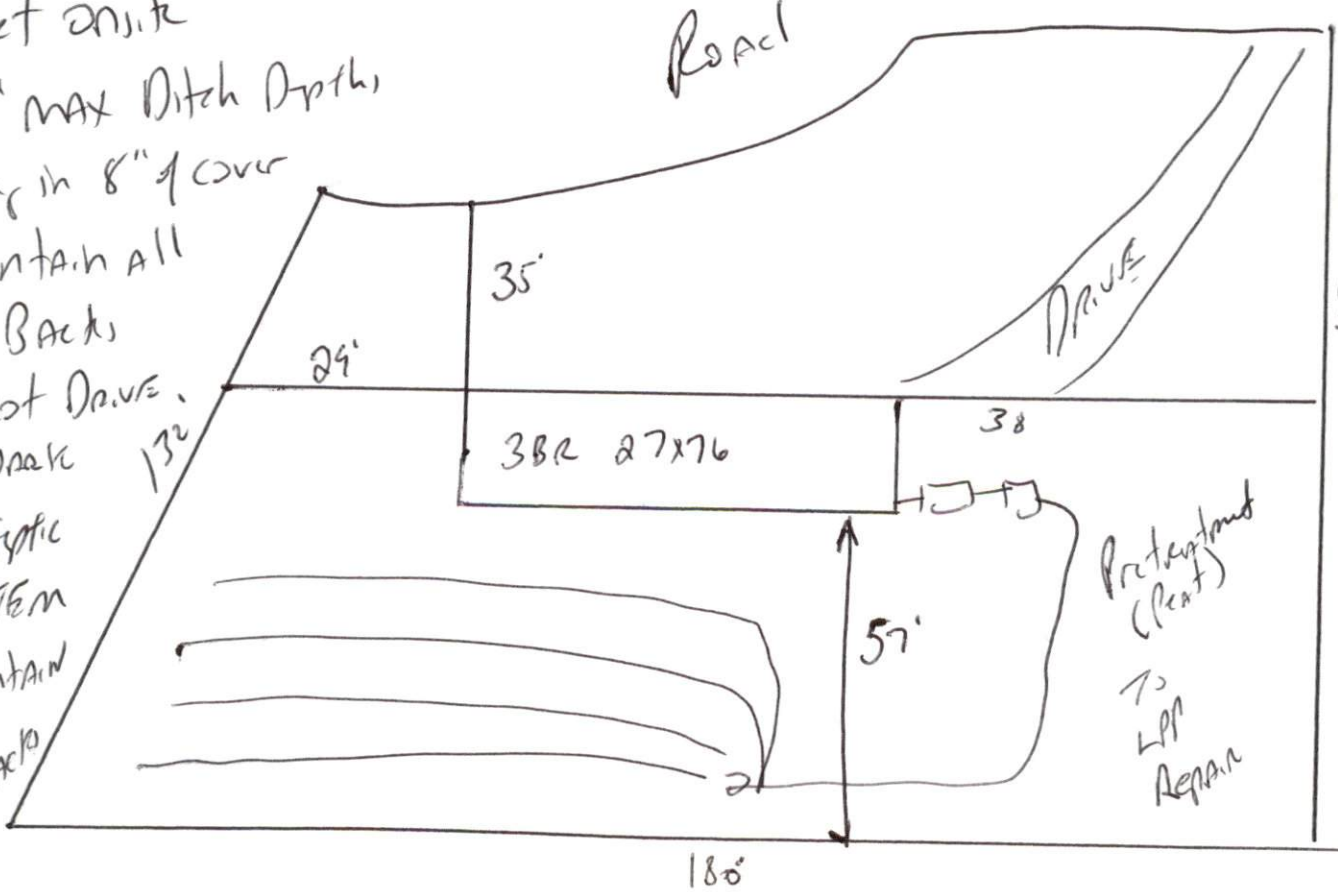
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other Pump to ultra shallow
 Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons
 Subsurface Drainage Field No. of ditches 4 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 10 MAX in.
 French Drain Required: _____ Linear feet

Date: 7-29-03
 Signed: [Signature]
 Environmental Health Specialist

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

Meet onsite
 12" MAX Ditch Depth
 Bring in 8" of cover
 Maintain all Set Backs
 Do not Drive or park on septic system
 Maintain all Set Backs



HARNETT COUNTY HEALTH DEPARTMENT
AUTORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 20182. 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.

Pine Grove

Name _____ Telephone# _____

Address _____

Wood Bridge Nc 2727

Property Location SR# _____ Road Name _____

Subdivision Wood Bridge Lot # 11 # Bedrooms Proposed 3(27x76) Lot Size .46Ac

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other Prop to Ultra Shallow

Basement With Plumbing Without Plumbing

Water Supply: Well Public Water Supply Minimum Well Setback: _____ Ft.

Septic Tank 1000 gal Pump Chamber 1000 gal

NITIRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 4 Ft.

Width of ditches 100 ft. Depth of ditches 12 max 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]

Signature of Authorized Agent for Harnett County of Harnett

7-25-00

Date