

IMPROVEMENT PERMIT

21166

HTE 03-5-8412

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) Terri Ricci
Property Location: SR# 1205
New Installation, Septic Tank, Repairs, Nitrification Line

Subdivision SHERWOOD FOREST Lot # 39

Tax ID # Quadrant #

Number of Bedrooms Proposed: 4 (28x76) Lot Size: .46 AC

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:

Subsurface Drainage Field No. of Ditches: 4 exact length of each ditch: 70 ft. width of ditches: 3 ft. depth of ditches: 18-24 in.

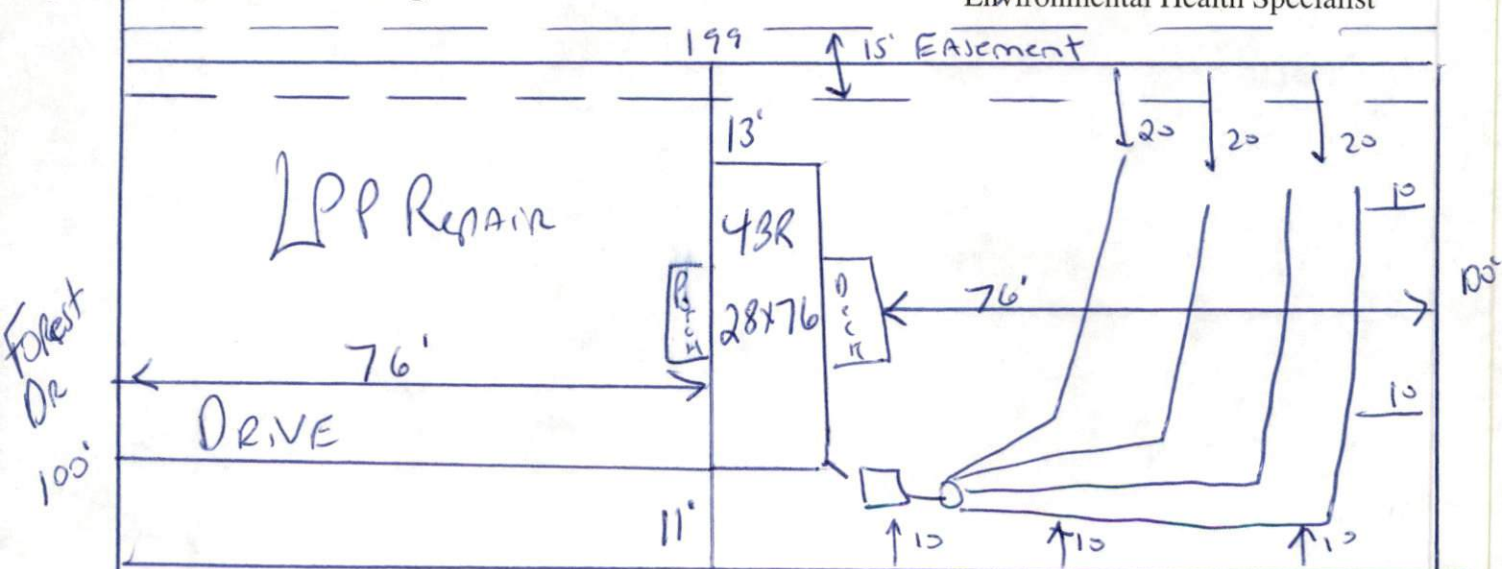
French Drain Required: Linear feet

Date: 12-17-03

Signed: [Signature]

Environmental Health Specialist

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



STUB out Plumbing shallow where shown
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 # \_\_\_\_\_. 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.

TERRI CIERI

Name

Telephone#

Address

1205

Property Location SR#

Shearwood Forest

39

4(28x76)

Road Name

46AC

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: \_\_\_\_\_ Ft.

Septic Tank

1000

gal

Pump Chamber

gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields

1

# of lines per field

4

Length of lines

70

Ft.

Width of ditches

3

ft.

Depth of ditches

18.24

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.

J. W. H. R. S.

Signature of Authorized Agent for Harnett County of Harnett

12-17-07

Date