

HTE 04-50010374

IMPROVEMENT PERMIT

21238

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) DONALD MOSS
Property Location: SR# 1141 MICROTOWER RD
SITE ON CHEROKEE TRAIL

New Installation checked
Septic Tank checked
Repairs unchecked
Nitrification Line checked

Subdivision LANDMARK DEV. Lot # 54

Tax ID # Quadrant #

Number of Bedrooms Proposed: 3 Lot Size: 1.83 AC

Basement with Plumbing: unchecked Garage: unchecked

Water Supply: unchecked Well checked Public unchecked Community unchecked

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: checked Conventional unchecked Other

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

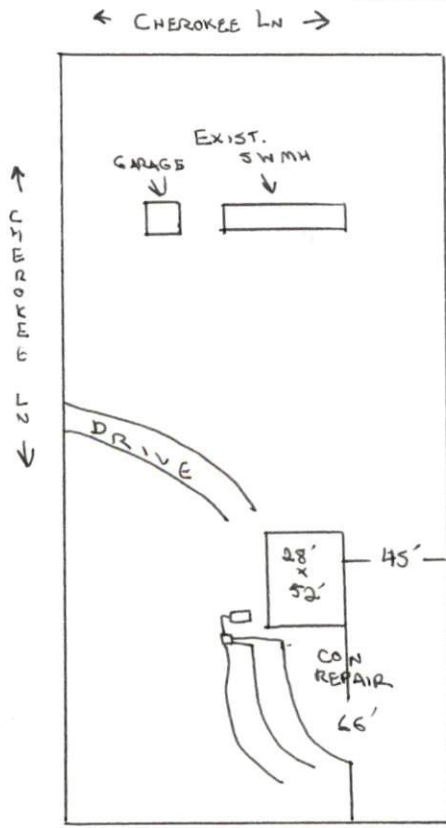
Subsurface Drainage Field: No. of ditches 3, exact length of each ditch 50 ft., width of ditches 3 ft., depth of ditches 18-24 in. max!

French Drain Required: Linear feet

Date: 9/30/04

Signed: [Signature] Environmental Health Specialist

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



*MAINTAIN ALL SETBACKS
*CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH
AUTORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 21238. 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.*

DONALD MOSS 893-8979
Name Telephone #

336 CHEROKEE LN LILLINGTON NC 27546
Address

1141 MICROTOWER RD
Property Location SR# Road Name

LANDMARK DEV. 54 3 1.83 AC
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 3 Length of lines 50 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.

[Signature] 9/30/04
Signature of Authorized Agent for Harnett County Date