

HTE 04-5-10706R

IMPROVEMENT PERMIT

21460

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) Curtis L. Batchelor New Installation Septic Tank
Property Location: SR# NC 87 Repairs Nitrification Line
NC 87 N (From NC 87) Turn onto Sandstone - 1/2 mile past Oliver
Subdivision _____ Lot # _____

Tax ID # _____ Quadrant # _____
Number of Bedrooms Proposed: 3 (14x70) Lot Size: 15.68 Ac

Basement with Plumbing: Garage: Owner said fine chips ok
Water Supply: Well Public Community
Distance From Well: 75 min 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

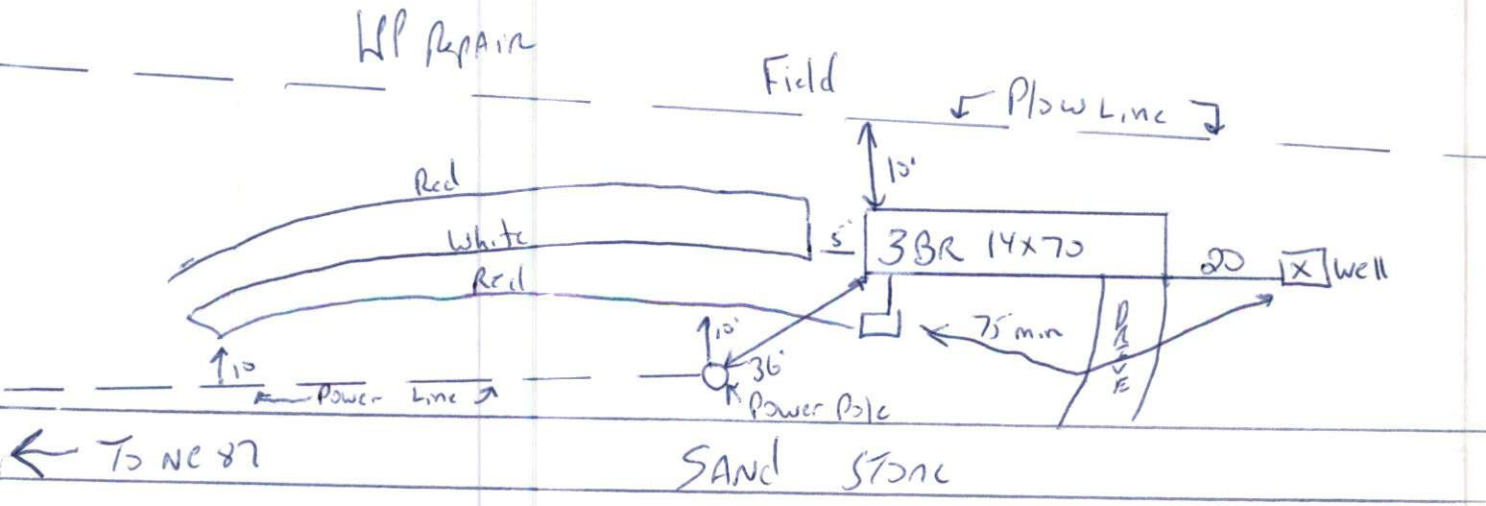
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 400 ft. width of ditches 3 ft. depth of ditches 18 in.

French Drain Required: _____ Linear feet

Date: 11-17-04

This permit is subject to revocation if site plans or intended use change.
Signed: J. W. [Signature]
Environmental Health Specialist

Do not DRIVE OR PAK on Septic system
Do not Allow Farm equipment to cross septic system.



Keep drainlines 10' from power line & poles - keep drain lines above plow line of field (Homeowner Request) maintain all setbacks Keep Septic Tank 75' from Well (min)

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 # 21460. 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.*

Curtis Batchelor
Name _____ Telephone # _____

Address _____

NC 87 (Sandstone)
Property Location SR# _____ Road Name _____

— — 3 (14x70) 15.68 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: 75 Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 400 Ft.

Width of ditches 3 ft. Depth of ditches 18 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.

Joe West RS 11-17-04
Signature of Authorized Agent for Harnett County _____ Date _____