

1-5-3051

HARNETT COUNTY HEALTH DEPARTMENT

No 18035

IMPROVEMENT PERMIT

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) Freedom Homes☒ New Installation☒ Septic TankProperty Location: SR# 1514 Dry Creek Rd.☐ Repairs☒ Nitrification LineSubdivision Stephenson Lot # 15

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 4 Lot Size: 2.193 AcBasement with Plumbing: ☐ Garage: ☐Water Supply: ☐ Well ☒ Public ☐ CommunityDistance From Well: 50 mi 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: _____ gallonsSubsurface Drainage Field No. of ditches 1 exact length of each ditch 400 ft. width of ditches 3 ft. depth of ditches 12 in. MAY 6 in cover needed

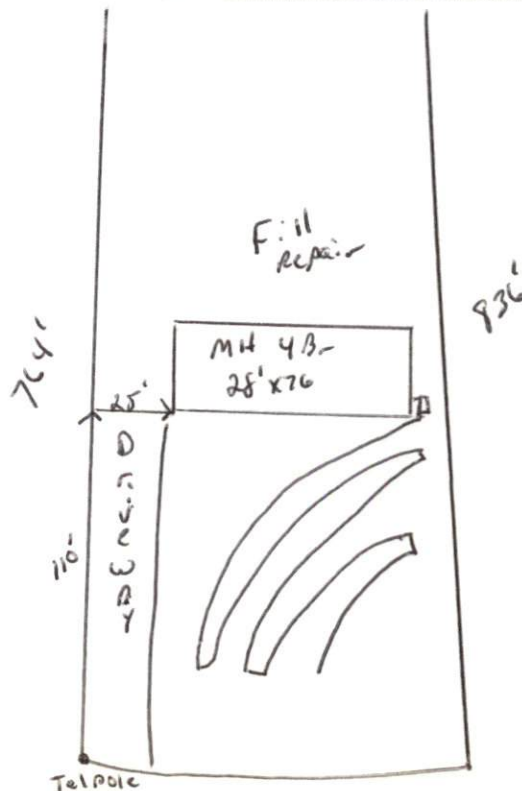
French Drain Required: _____ Linear feet

Date: 10/3/2001

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

Signed: Bryan M. Swain R.S.
Environmental Health Specialist

- * Maintain all setbacks
- * Run ditch on contour
- * Ditch to be NO DEEPER than 12 inches
- * 6 inches of cover required over system



SR 1514

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 # 18035. 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.

Owner or Authorized Agent _____

Name: Freedom Homes Telephone # 919-662-4100

Address: 3720 Fayetteville Rd. Raleigh, N.C. 27603

Property Location: SR # 1514 Road Name Dry Creek

New Installation ☒ Repair ☐ Septic Tank ☒ Nitrification Lines ☒

Subdivision Stephenson Lot # 15

Number of Bedrooms Proposed: 4 Lot size: 2.193 Ac

Basement ☐ With Plumbing ☐ Without Plumbing ☐

Water Supply: Well ☐ Public ☒ Minimum Well Setback: _____ ft.

Type of System: Conventional ☒ Other ☐

Tank Volume: Septic Tank 1000 gallons Pump Chamber _____ gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 1 Length of lines 400 ft.

Width of ditches 3 ft. Depth of ditches 12 inches MAY
6 inches of cover

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.

Authorized Agent for Harnett County Health Department

Name: Bryan M. Smith Date: 10/3/2001