

HTE 03-5-8220

HARNETT COUNTY HEALTH DEPARTMENT

## IMPROVEMENT PERMIT

20389

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) Wayne FARRAR☒ New Installation ☒ Septic TankProperty Location: SR# 1239 Falcon Rd☐ Repairs ☒ Nitrification LineSubdivision Wayne FarrarLot # 1

Tax ID # \_\_\_\_\_

Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 3 (24x45) set-up Lot Size: 9.51 acBasement with Plumbing: ☐Garage: ☐Water Supply: ☐ Well☒ Public☐ CommunityDistance 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: \_\_\_\_\_ gallons

Subsurface

No. of

exact length

width of

depth of

Drainage Field

ditches 1of each ditch 400 ft.ditches 3 ft.ditches 18 max in.

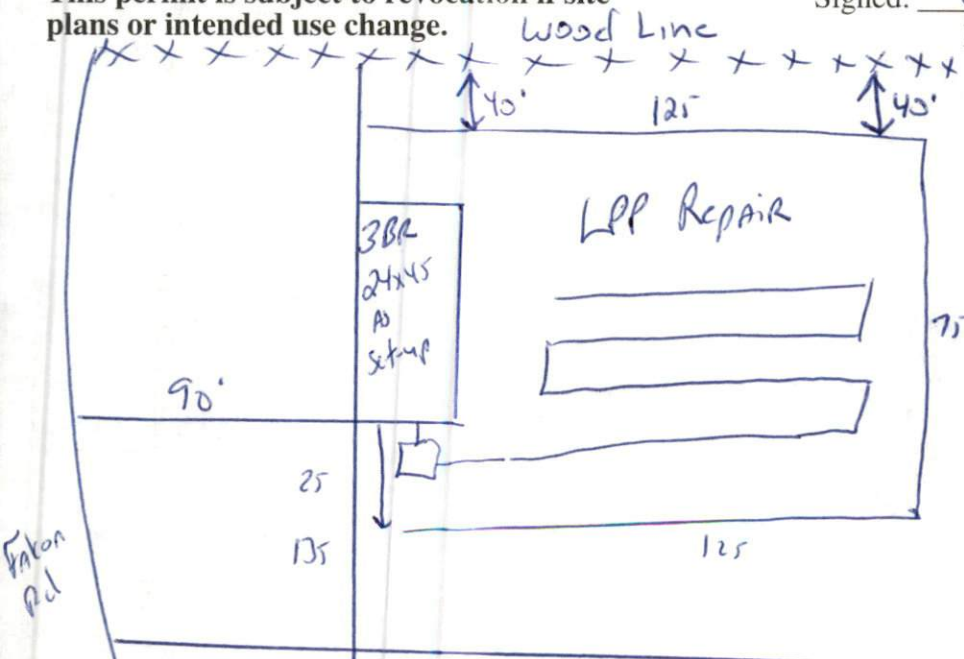
French Drain Required: \_\_\_\_\_ Linear feet

Date: 11-21-03

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

Signed: [Signature]

Environmental Health Specialist



Stub Out Plumbing shallow maintain All set Backs  
Keep SYSTEM WITHIN AREA SHOWN  
18" MAX Ditch Depth

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 # 20389. 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.

Wayne Farrar  
Name

Telephone#

Address

1239

Property Location SR#

Wayne Farrar  
Subdivision

1  
Lot #

3(24x45) AS  
Set-up  
# Bedrooms Proposed

Road Name

9.51 Ac  
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 1 Length of lines 400 Ft.

Width of ditches 3 ft. Depth of ditches 18" 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

11-21-03  
Date