HARN COUNTY HEALTH DEPARTME

HTE 03-5-8334

* MARNTAIN ALL SETBACKS

+ CALL WITH ANY QUESTIONS PRICE TO INSTALLATION

IMPROVEMENT PERMIT

20715

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) JOHNSON, RANDALL & SHERIAN New Installation & Septic Tank Property Location: SR#_1505 PERLOGE RD Repairs Nitrification Line Subdivision ____ Lot # Tax ID# Quadrant # ____ Number of Bedrooms Proposed: 3 Lot Size: 3, 19 Ac-Garage: Basement with Plumbing: Water Supply: Well N Public ☐ Community 50 ft. Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: **A** Conventional Other Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons Subsurface No. of exact length width of depth of ditches 1 of each ditch 200 ft. ditches 3 ft. Drainage Field ditches 18 French Drain Required: 300 Linear feet @,42" DEEP Date: es COLIVER TOLKSDORF This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist *SEE ATTACHED DRAWING FOR SYSTEM LAYOUT * INTERCEPTOR ORAIN TO BE INSTALLED FIRST

HARNETT C NTY DEPARTMENT OF PUB HEALTH AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 20715 . 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. Name

Telephone #

Address

PEARIDGE RD ANGIER NC 2750) Noad Name

Address

Property Location SR#

Road Name 3 3-19AC
Bedrooms Proposed Lot Size Lot## Bed Subdivision 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 **NITRIFICATION FIELD SPECIFICATIONS** Number of fields / # of lines per field / Length of lines 200 Ft. Width of ditches ____ ft. Depth of ditches ___ \gamma \gamma inches French Drain: Linear feet required 300 Depth of gravel 42" 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 of Authorized Agent for Harnett County

Randall Johnson Pro rty - File No. 03-5-833

On-Site Wastewater Design Specifications

House Footprint: 30 x 60 (No Foundation Drain)

Bedrooms: 3 (Daily Flow 360 gallons)

ared By: LJF
Hal Owen & Associates, Inc.
Soil & Environmental Scientists
P.O. Box 400, 266 Old Coats Rd.
Lillington, NC 27546-0400
Phone: (910) 893-8743

Initial System: Gravity Serial Distr. Conventional (200-ft) on contour at: 18 inches

LTAR: 0.6 gpd/sqft

Repair System: Gravity Serial Distr. Conventional (200-ft)

on contour at: 18 inches LTAR: 0.6 gpd/sqft

EIP □ Septic Tank

Step-down ■ Pump Tank

Proposed Well ○ D-Box

Existing Well □ Pressure Manifold

LEGEND

Outlet Ursuitable

Soils

Provisionally Suitable

Soils

Basin

I''= 100 (Approx)

Drain

Tracceptor (42" deep)

Lines flagged at site on 9-ft centers.

Initial/ Repair	Line #	Color	Drainline Length(ft)	Measured Field Line Length (ft)	Relative Elevation (ft)
N/A	1	В	0	32	101.88
Repair	2	R	85	86	101.57
Repair	3	W	115	116	101.07
Initial	4	В	110	134	100.56
Initial	5	Υ	90	97	100.14
		Total:	400	465	EIP=100