## HA ETT COUNTY HEALTH DEPART NT

HTE 0450010643

## INPROVEMENT PERMIT

21675

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) Chaisy PATTERSON  Property Location: SR# 1130 NORRINGTON RO (MACK RD)	New Installation Septic Tank □ Repairs Nitrification Line
Subdivision Manal Rakes  Tax ID #  Number of Bedrooms Proposed: HLot	Lot #\\ Quadrant #
Basement with Plumbing: Garage: Water Supply: Well Public Community  Distance From Well: ft.  Following is the minimum specifications for sewage disposal to final approval.	
Size of tank: Septic Tank: 1000 gallons Pum	
Subsurface No. of exact length Drainage Field ditches 6 of each ditch of each ditch.  French Drain Required:Linear feet	width of depth of ditches 3 ft. ditches 12-14 in.
Date	e: 227 05  ned: LIVEA TOLKSOOP  Environmental Health Specialist
* MAINTAIN ALL SETBACKS  * POMP SPECS  45gpm @ 20'TDH)  *MANATEE SPECS  2' PRESSURE HEAD  3" SCH40 PIPE  6 'S" SCH40 VALVES  * MINIMUM OF 6" OF COVER  NEEDED OVER DRAINFIELD  * CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION	28'x 80'

## HARNETT COUNTY DEPARTMENT OF P LIC HEALTH ALL HORIZATION TO CONST...JCT

Authorization is hereby given to construct a wastewater system to the specifications described by		
Harnett County Department of Public Health, Improvement Permit # 2)675 . 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.		
CHRISTY PATTERSON	910 -814-1838	
Name	Telephone #	
3445 USHAI LILLINGTON NC 27546		
Address		
1130 NORRINGTON RO		
Property Location SR# Road Name		
MCNEILL ACRES 11 4	.92)Ac	
MCNEILL ACRES   1 4 Subdivision Lot # Bedrooms Proposed	Lot Size	
TYPE OF SYSTEM		
New Installation [ ] Repair Septic Tank	ication Lines	
[] Conventional DO Other Pump To 25% REDUCTION SYSTEM		
[ ] Basement [ ] With Plumbing [ ] Without Plumbing		
Water Supply: [ ] Well Public Water Supply Minimum Well Setback: 100 Ft.		
Septic Tank gal Pump Chamber gal		
NITRIFICATION FIELD SPECIFICATIONS		
Number of fields # of lines per field Length	of lines 70 Ft.	
Width of ditches ft. Depth of ditches inches 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.		
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Mary 25	2)21/05	
Signature of Authorized Agent for Harnett County	Date	