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HTE# 106-5- ~~15350~~

HARNETT COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT 23114

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) CHARLENE KIDD New Installation ☒ Septic Tank ☒ Repair ☐

Property Location: SR# Hwy 42 W Nitrification Line ☒ Expansion ☐

Subdivision _____ Lot # _____

Tax ID# _____ Quadrant # _____

Number of Bedrooms Proposed: 3 BM 360 GPD Lot Size: 42.27 ACRES

Basement with Plumbing: ☐ Garage: ☒

Water Supply: ☐ Well ☒ Public ☐ Community

Distance 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 25% Reduction System

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface No. of exact length width of depth of
Drainage Field ditches 3 ft. of each ditch 100 ft. ditches 3 ft. ditches 22' nap in.

French Drain Required: - Linear feet

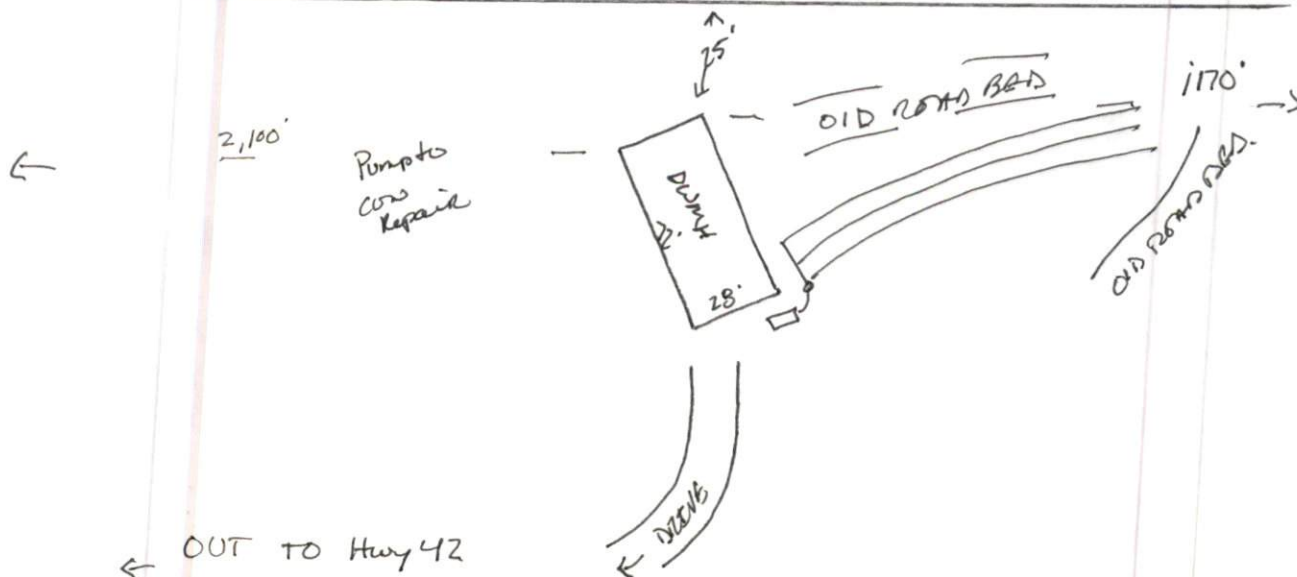
Date: 7-27-06

This permit is subject to revocation if site plans or intended use change.
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

*Contractor
TO MEET
ON SITE
Prior to install.

42.27 ACRES
TRACT

Signed: James E. Manhart
Environmental Health Specialist



HARNETT COUNTY DEPARTMENT OF PUBLIC 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 # 23114. 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 Charlene KIDD Telephone # 422-6825

Address P.O. Box 1130 Fugate Valley N.C. 27526

Property Location SR# Hwy 42 Road Name 42

Subdivision _____ Lot # _____ # Bedrooms Proposed 3 BR 360 GPD Lot Size 42.27 acres

TYPE OF SYSTEM

☒ New Installation ☐ Repair ☒ Septic Tank ☐ Nitrification Lines

☐ Conventional ☒ Other 25% Reduction

☐ 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 2 # of lines per field 3 Length of lines 100 Ft.

Width of ditches 3 ft. Depth of ditches 22 in 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.

James E. Merchant
Signature of Authorized Agent for Harnett County

7-27-06
Date