

IMPROVEMENT PERMIT

03-5-6964

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) Regency Home

New Installation  Septic Tank

Property Location: SR# 1115

Repairs  Nitrification Line

Subdivision Peach Tree

Lot # 93

Tax ID #

Quadrant #

Number of Bedrooms Proposed: 3 (40x60)

Lot Size: 68AC

Basement with Plumbing:

Garage:  Please note change in

Water Supply:  Well  Public

Community house location - Home must

Distance From Well: 50 ft.

be 25' from front property line

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 Drainage Field No. of ditches 1 exact length of each ditch 300 ft. width of ditches 3 ft. depth of ditches 18 in.

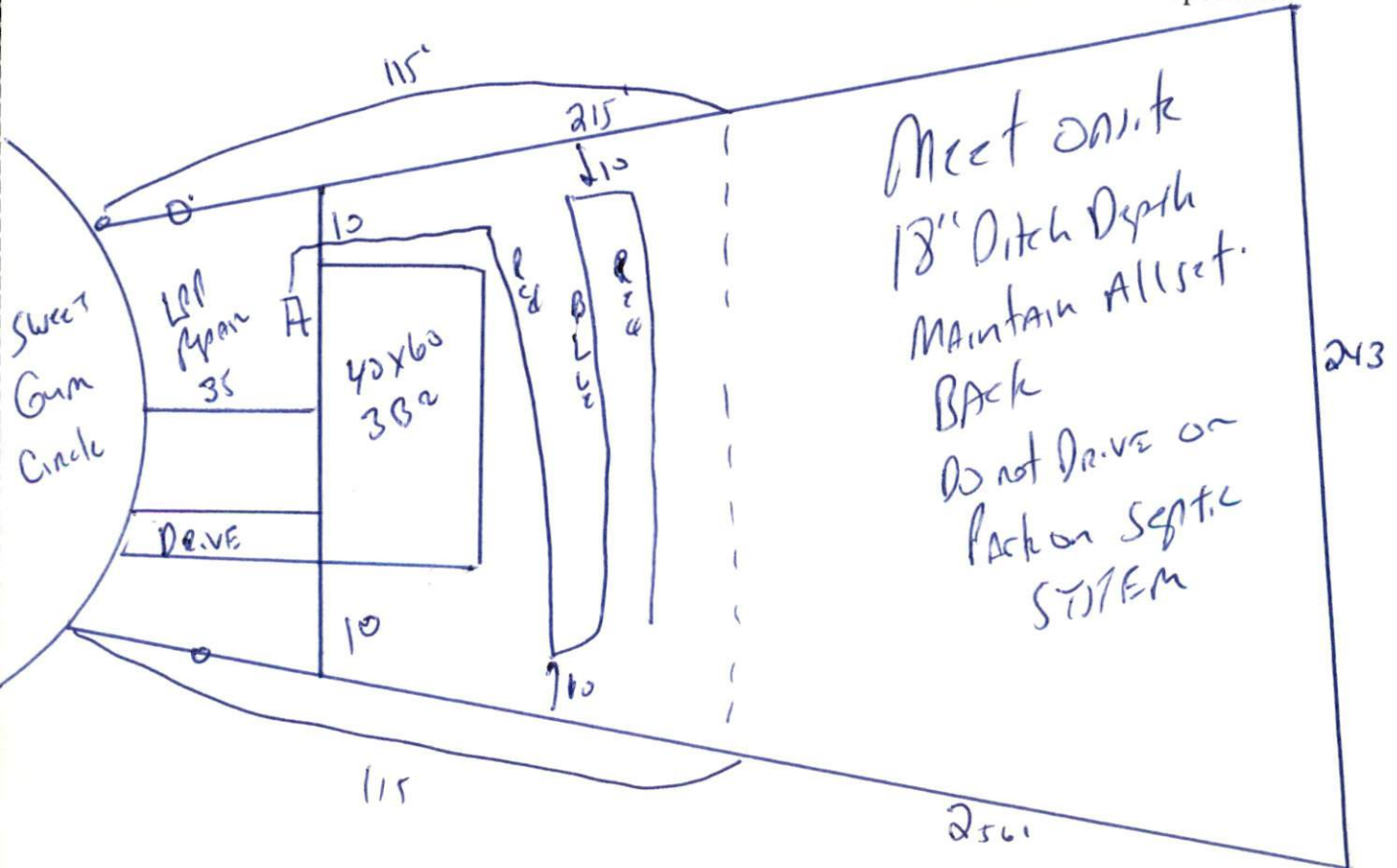
French Drain Required: Linear feet

Date: 6.6-03

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

Signed: J. W. W. S.

Environmental Health Specialist



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 # 19425. 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 Regency Home Telephone# 424-0455

Address \_\_\_\_\_

Property Location SR# 1115 Road Name \_\_\_\_\_

Subdivision Peach Tree Lot # 93 # Bedrooms Proposed 3 (40x60) Lot Size 268m

**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 200 Ft.

Width of ditches 2 ft. Depth of ditches 18 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 of Authorized Agent for Harnett County of Harnett [Signature] Date 6-6-03