

HTE 03-5-728812

IMPROVEMENT PERMIT

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) Kenny STEWART New Installation Septic Tank
Property Location: SR# 1516 Sheriff Johnson Repairs Nitrification Line

Subdivision _____ Lot # _____

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 2.58 Acre

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 INNOVATIVE 25% reduction system

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

Subsurface Drainage Field No. of ditches 3 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 16-7/8 in. max

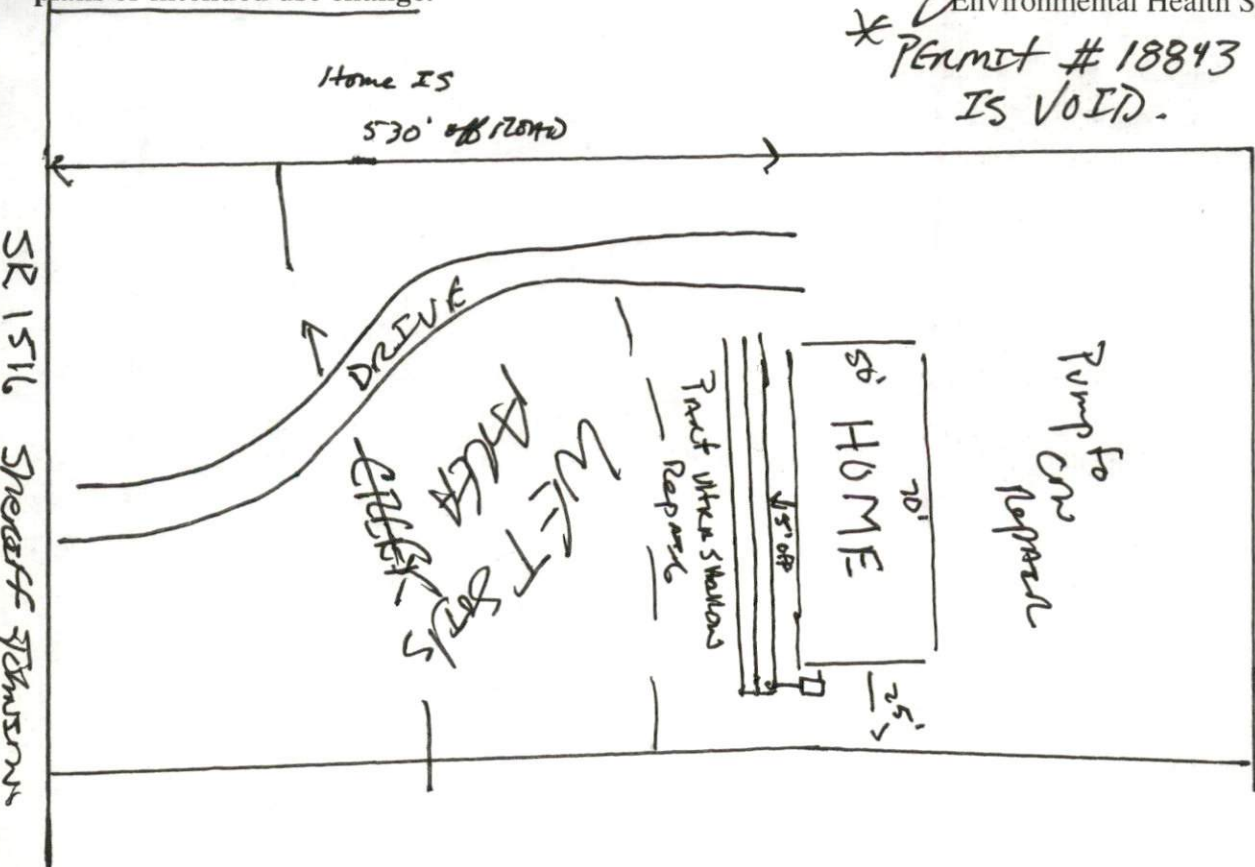
French Drain Required: - Linear feet

Date: Dec 1-16-04

Signed: James E. Monahan
Environmental Health Specialist

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

* PERMIT # 18843 IS VOID.



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 # 20345. 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 Kenny STEWART Telephone# 910-893-8451
Address P.O. Box 884 Buies Creek N.C. 27506
Property Location SR# 1516 Road Name Sheriff Johnson
Subdivision _____ Lot # 3 # Bedrooms Proposed 2.58 Lot Size _____

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines
 Conventional Other 25% Reduction System
 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 16-18 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 of Harnett

1-16-04
Date