HTE# Byes 1901-0040 Harnett County Department of Public Health No. 26055 **Operation Permit** PERMIT # _ New Installation Septic Tank Nitrification Line Repair Expansion PROPERTY LOCATION: 90 Chero kee Lane lorica SUBDIVISION _____ Name: (owner) _ System Installer: _ Registration # _ Basement with plumbing: Garage

Number of Bedrooms Type of Water Supply:

Community 🔀 Public 🗌 Well Distance from well System Type: 3a _ Types V and VI Systems expire in 5 years. (In accordance with Table Va) Owner must contact Health Department 6 months prior to expiration for permit renewal. This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.

cherokee In PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule .1961. 11. Monitoring: As required by Rule .1961. III. As required by Rule .1961. Other: ___ Maintenance: Subsurface system operator required? Yes
No
No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: □______Alarm □ H20Line □ D-Box Pump **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. Septic Tank: _ 1000 Other EZ I-10W Type of system:

Conventional gallons Pump Tank: gallons Subsurface No. of exact length width of depth of of each ditch ___ Drainage Field ditches ditches French Drain Required: Linear feet

Authorized State Agent

Date