

HTE# 065-16161 ^{16162 gar}

PERMIT # 23506

Harnett County Department of Public Health 19633

Operation Permit

New Installation Septic Tank Repair Nitrification Line Expansion

Name: (owner) CORNERSTONE RESIDENTIAL BUILD. SUBDIVISION PROPERTY LOCATION: US421 NORTH LOT # _____

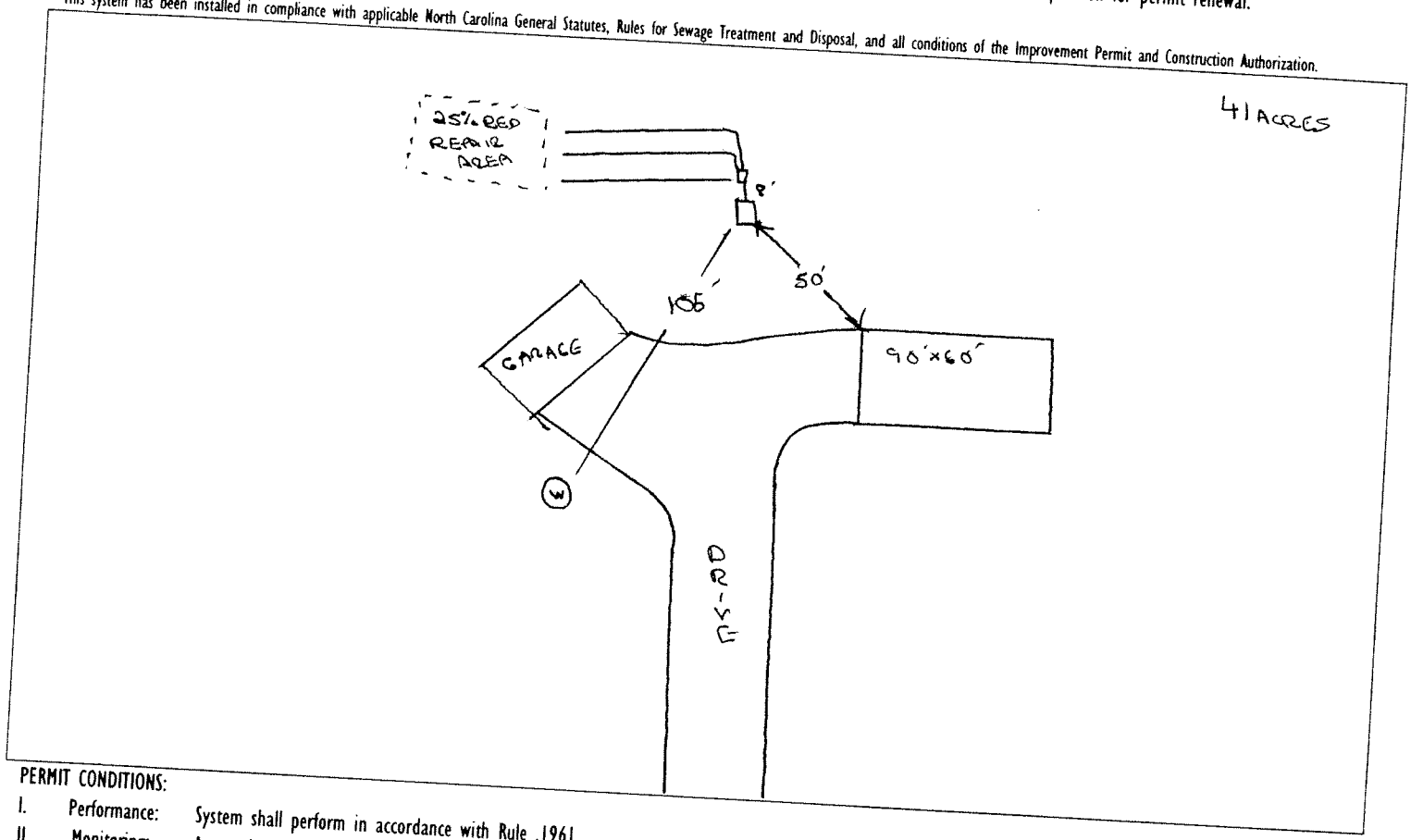
System Installer: MIKE BRODSONELL Registration # _____

Basement with plumbing: Garage Number of Bedrooms 4

Type of Water Supply: Community Public Well Distance from well 105' feet

System Type: IIIg
(In accordance with Table V a) Types V and VI Systems expire in 5 years.
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.



PERMIT CONDITIONS:

- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- III. Maintenance: As required by Rule .1961. Other: _____
Subsurface system operator required? Yes No
- IV. Operation: If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- V. Other: _____

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other QUICK 4 CHAMBER Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field: No. of ditches 3 exact length of each ditch 60 feet (15 PANELS) width of ditches 3 feet depth of ditches 24 inches

French Drain Required: _____

Authorized State Agent [Signature] RS Date 9/25/07