Harnett County Department of Public Health
PERMIT # BACS 1007-0090 Operation Permit
New Installation Septic Tank Mitrification Line Repair Expansion
Name: (owner) Gonzalo Acosta SUBDIVISION Tector LOT # System Installer:
Basement with plumbing: Garage Number of Bedrooms Fupe of Water Supply: Community Public Well Distance from well Fupe of Water Supply: Fupe of Water Sup
System Type: 2525 iUAD ICIDA System TransTVGC 6.4. 2 Ixpes V and VI Systems expire in 5 years.
(In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal.
This system has been installed in compliance with applicable North Cardina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
District District Sort
Typee LANG
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule .1961. II. Monitoring: As required by Rule .1961. III. Maintenance: Subsurface system operator required? Yes \(\square\) No \(\square\)
If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation:
V. Other:
□ D-Box □ Pump □Alarm □H20Line □PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.
Type of system: Conventional Other 2520 R500 CTCO Subsurface No. of exact length width of depth of
Drainage Field ditches 3 of each ditch 50 feet ditches 5 feet ditches 1 inches
d 11 HOZEHS
Authorized State Agent Date 12-17- 20