HTE# 10-5-25651

PERMIT # 26098

Harnett County Department of Public Health

Operation Permit

21717

☑ New Installation ☑ Septic Tank ☑ Nitrification Line ☐ Repair ☐ Expansion

PROPERTY LOCATION: SR 1448 ATKINS RD

Name: (owner) Comfort Homes INC SUBDIVISION STETSON LOT # 48

System Installer: Fish Brothers Registration # _____

Basement with plumbing: ☐ Garage ☑ Number of Bedrooms 3

Type of Water Supply: ☐ Community ☑ Public ☐ Well Distance from well _____ feet

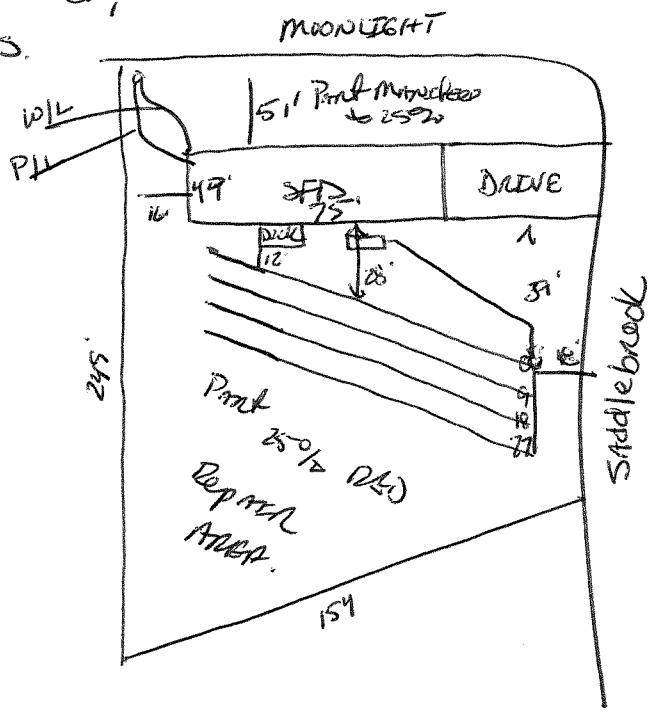
System Type: 25% REDUCTION System Type III G BELAY Types V and VI Systems expire in 5 years.

(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 Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.

*INSTALLED AS permitted,

*Full STORAGE ON LINES.



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 ☐

If yes, see attached sheet for additional operation conditions, maintenance and reporting.

IV. Operation: _____

V. Other: _____

☐ _____ D-Box ☐ _____ Pump ☐ _____ Alarm ☐ _____ H2OLine ☐ _____ PWR Line

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

Type of system: ☐ Conventional ☑ Other 25% REDUCTION System Type III G BELAY Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 4 exact length of each ditch 80 feet width of ditches 3 feet depth of ditches 22-318 inches

French Drain Required: _____ Linear feet

Authorized State Agent James E Manhart [signature] Date 2-8-11.