## Harnett County Department of Public Health

| PERMIT # BRES 2011 - 6015 Z   | Operation Permit  |
|---|---|
|   | ✓ New Installation ✓ Septic Tank ✓ Nitrification Line ☐ Repair ☐ Expansion            |
|   | PROPERTY LOCATION: 2815 Naturator 20  SUBDIVISIONLOT #                                |
| Name: (owner) Justin Paterson   | SUBDIVISIONLOT #  |
| System Installer: Bobby Thomas  |   |
| Basement with plumbing: Garage Mumber of Bedrooms   |   |
| Type of Water Supply:  Community Public Well  |   |
| System Type: 25% 70000000 System Clar<br>(In accordance with Table V a)   | Owner must contact Health Department 6 months prior to expiration for permit renewal. |
| (in accordance with rable v a)  |   |
| 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. |   |
| 1 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5   | 10, 10, 10, 10, 10, 10, 10, 10, 10, 10,   |
| PERMIT CONDITIONS:  I. Performance: System shall perform in accordance with Rule  | e .1961.  |
| II. Monitoring: As required by Rule .1961.  |   |
| III. Maintenance: As required by Rule .1961. Other:   | N. D  |
| Subsurface system operator required? Yes □<br>If yes, see attached sheet for additional oper  |   |
| IV. Operation:  | and conditions, maintenance and reporting.  |
|   |   |
| V. Other:   | ningh- RD   |
| □ D-Box □ Pum   |   |
| Following are the specifications for the sewage disposal system on the Type of system:  Conventional  Other 252   |   |
| Subsurface No. of exact len   |   |
|   | ditch   |
| French Drain Required: Linear feet  |   |
| Authorized State Agent me & A   | (AshAnt Date 8-9-21   |