Harnett County Department of Public Health

Operation Permit

PERMIT #	operation remit
	Mew Installation 🔎 Septic Tank 🗷 Nitrification Line 🗌 Repair 🗌 Expansion
	PROPERTY LOCATION: 261 HOBSY 2000 (50 1400)
	FINOTENIT LOCATION. ACT FICEDST CO. AS CONT.
Name: (owner) Truster HOME PROS	SUBDIVISION Triances Home enos LOT # 5
System Installer: ADCOCK ESCANATING	Registration #
Basement with plumbing: Garage A Number of Bedrooms	3
	Distance from well feet
System Type: 25% VENCTION STS.	
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for permit renewal.
(III accordance with Table 7 a)	Which must contact reach beparation of months provide supration for persons remain
This system has been installed in compliance with applicable North Carolina General State	utes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
REPAIL ANDA ALDAIL ANDA AND	10' 15' WIASSITY TO D-BOX
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule II. Monitoring: As required by Rule .1961. Maintenance: As required by Rule 1961. Other Consumption of the Consumption o	(5n 1400)
If yes, see attached sheet for additional operation	
The track which will be a second of the seco	ion 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	
Type of system: Conventional Other EZ =	The state of the s
Subsurface No. of exact leng Drainage Field ditches 3 of each di	
•	tch 160 feet ditches 3 feet ditches 24 inches
French Drain Required: Linear feet	
Authorized State Agent	Date 07 02 2020