Harnett County Department of Public Health

Operation Permit PERMIT # 5002007-0054 New Installation 🕸 Septic Tank 🔯 Nitrification Line 🗆 Repair 🗆 Expansion PROPERTY LOCATION: 2000 COANCHADEND DO. (NC 42) LOT # 3 Name: (owner) CUMBERLAND HOMES SUBDIVISION CARTIANZA System Installer: TOWNS AUILA. Garage Number of Bedrooms Basement with plumbing: Type of Water Supply:

Community Public Well Distance from well 25% 1500000 5.3. IIIg _____ Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewal. (In accordance with Table V a) all conditions of the Improvement Permit and Construction Authorization. This system has been installed in compliance with applicable North Carolina General Sta 19) PERMIT CONDITIONS: System shall perform in accordance with Rule .1961. Performance: As required by Rule .1961. MSUAHNAO 11. Monitoring: III. As required by Rule .1961. Other: Maintenance: Subsurface system operator required? Yes
No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: Other: ٧. D-Box □ Alarm □ H20Line **PWR Line** Pump Following are the specifications for the sewage disposal system on the above captioned property. gallons Pump Tank: Other ____ Et acon IIIs Septic Tank: Type of system:

Conventional Subsurface No. of exact length width of ditches 24 of each ditch ditches Drainage Field ditches French Drain Required:

Authorized State Agent

Date