

16-5-38600

HTE# 16-5-382302

## Harnett County Department of Public Health

24600

PERMIT # 28771

## Operation Permit

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

PROPERTY LOCATION: OAKMOSS

Name: (owner) LANCASTER, Nancy &amp; Mike SUBDIVISION EAKER/PATTERSON (MID. BRANCH) LOT # B

System Installer: ALBY MOSS Registration #

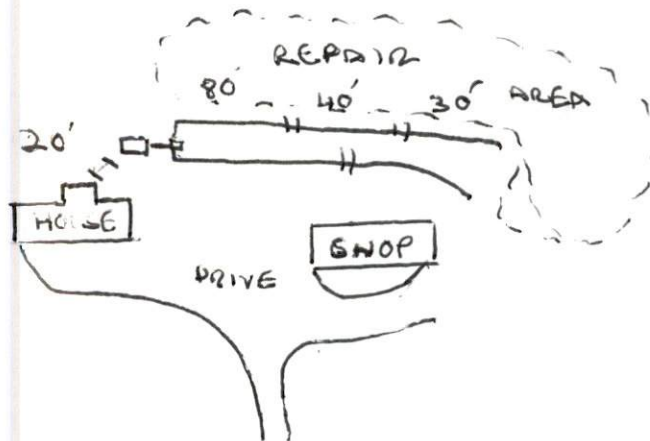
Basement with plumbing: ☒ Garage ☒ Number of Bedrooms 4Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well feet

System Type: 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.



## 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 ☐ H2O Line ☐ PWR Line

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

Type of system: ☐ Conventional ☒ Other E2 FLOW Septic Tank: 1000 gallons Pump Tank: gallonsSubsurface No. of exact length width of depth of  
Drainage Field ditches 2 of each ditch 150 feet ditches 3 feet ditches 18-24 inches

French Drain Required Linear feet

BELOW NAT. GRADE

Authorized State Agent

REHS

Date 7/19/17