

HTE# 108-5-432770

Harnett County Department of Public Health

25212

PERMIT # 29910

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: 930 S. Lincoln St (521700)

Name: (owner) Christie Ross SUBDIVISION _____ LOT # _____

System Installer: Clint Adams Registration # _____

Basement with plumbing: Garage Number of Bedrooms _____ 240 GPD MAX

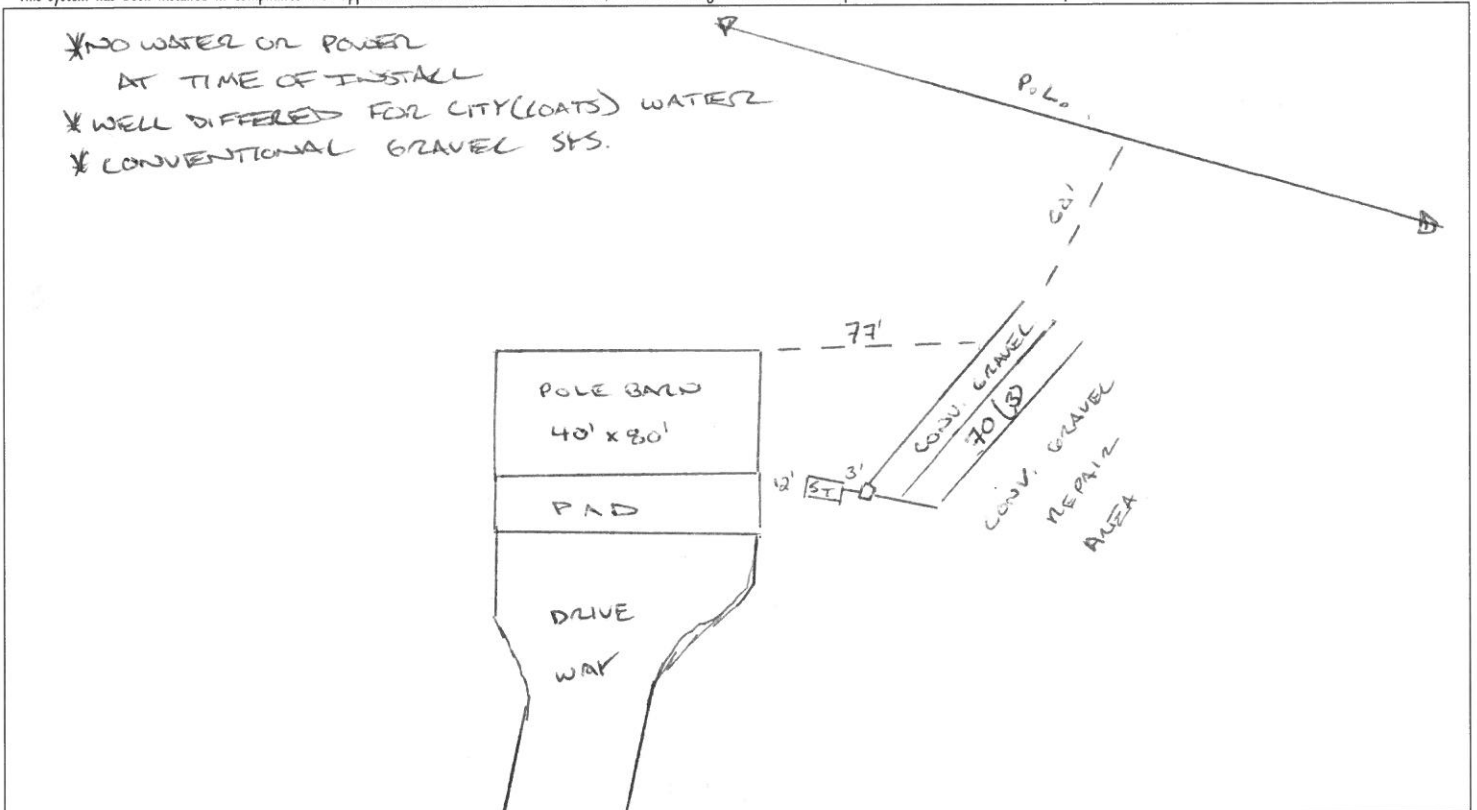
* FARM USE *

Type of Water Supply: Community Public Well Distance from well NA feet

System Type: 25% Aeration IIA Types V and VI Systems expire in 5 years.

(In accordance with Table V a) conventional gravel 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: _____

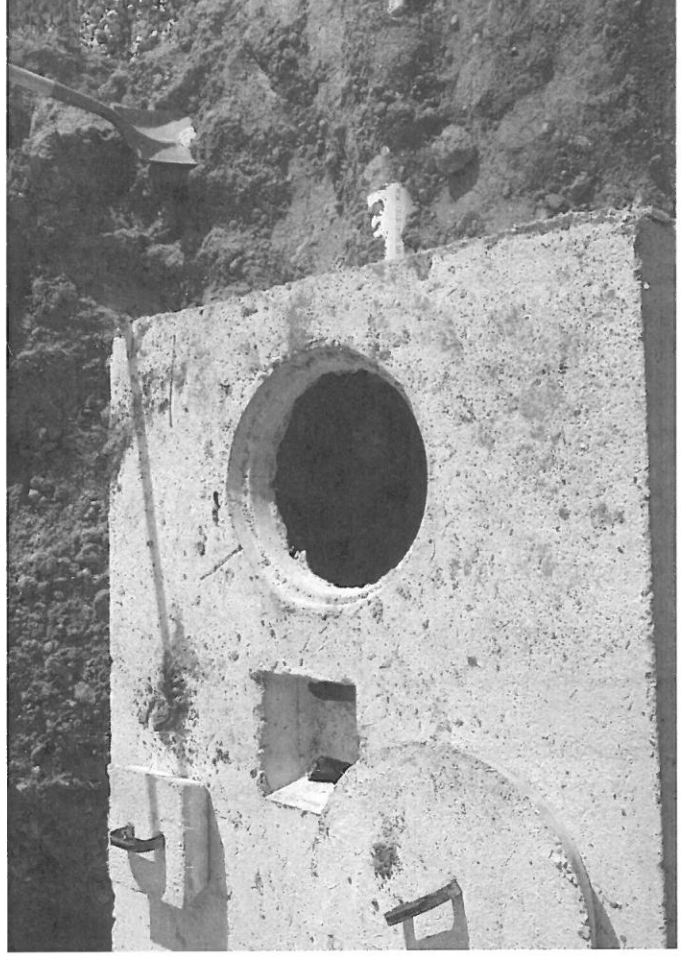
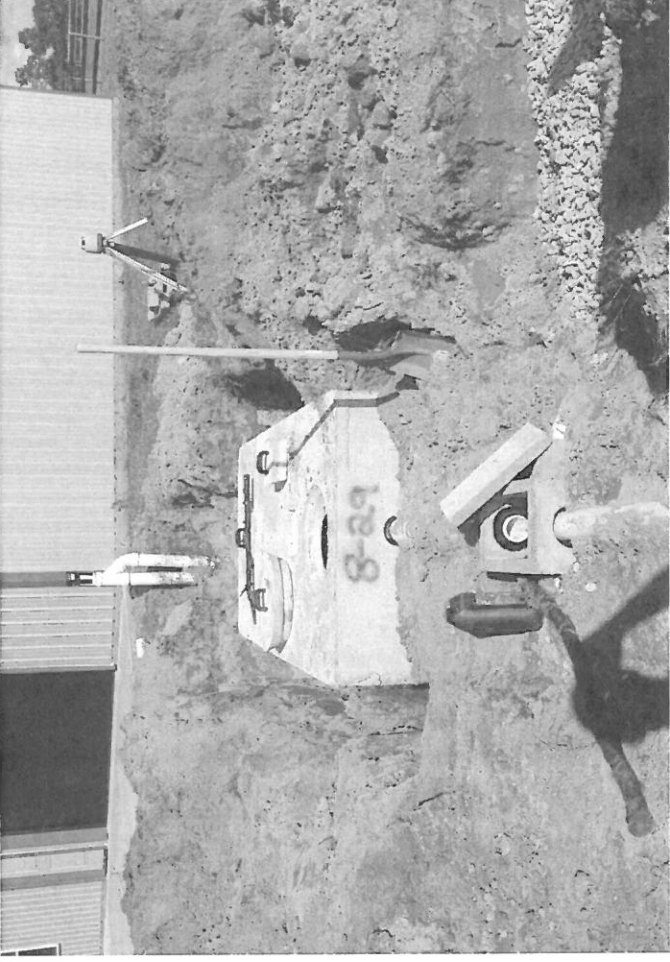
D-Box Pump Alarm H2O Line PWR Line

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

Type of system: Conventional Other _____ Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface No. of exact length width of depth of
 Drainage Field ditches 3 of each ditch 70 feet ditches 3 feet ditches 24 inches
 French Drain Required: _____ Linear feet

Authorized State Agent [Signature] Date 10/15/2008

930 S. Lincoln St. (see photo)



18-5-432772

