

HTE# 01-5-17897022 Harnett County Department of Public Health

PERMIT # 26721

Operation Permit

22213

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

PROPERTY LOCATION: SHERMAN PINES DR

Name: (owner) JOHN P. BENSON SUBDIVISION SHERMAN PINES LOT # 20

System Installer: RICKY HOLLAND Registration # \_\_\_\_\_

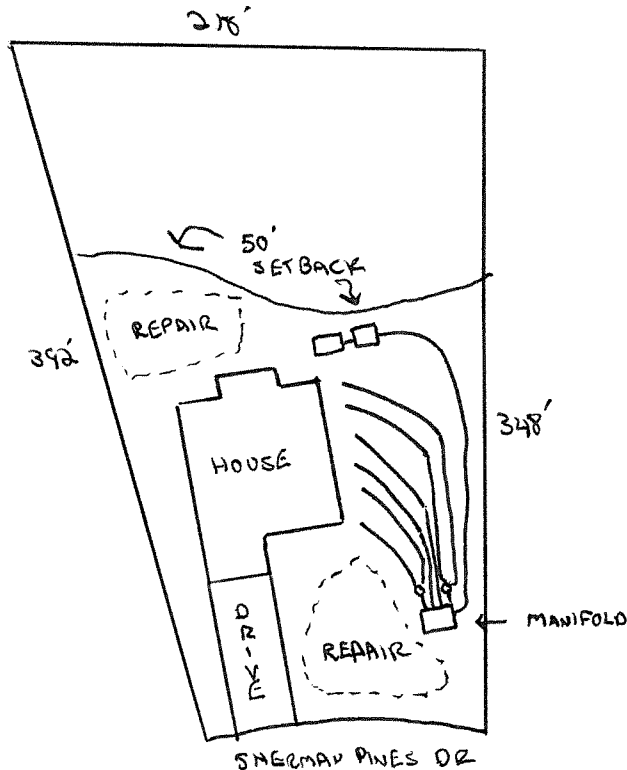
Basement with plumbing: ☐ Garage ☒ Number of Bedrooms 3

Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well 100 feet

System Type: IIIb 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: REPLACE BATTERY IN PANEL ONCE A YEAR

V. Other: DISTRIBUTION THROUGH MANIFOLD. ALL SYSTEM SPECIFICATIONS ON FILE AT

☐ D-Box ☐ Pump ☐ Alarm ☐ H2O Line ☐ HEALTH DEPARTMENT PWR Line

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

Type of system: ☐ Conventional ☒ Other PUMP TO CHAMBER (Q1\*) Septic Tank: 1000 gallons Pump Tank: 1000 gallons

Subsurface Drainage Field No. of ditches 6 exact length of each ditch VARIOUS feet width of ditches 3 feet depth of ditches 12 inches

French Drain Required: \_\_\_\_\_ Linear feet 240' TOTAL

Authorized State Agent \_\_\_\_\_

LEHS

Date 2/14/12