HTE# 08 500 2048/ Harnett County Department of Public Health 20383 PERMIT # 24 891 **Operation Permit** New Installation Septic Tank Repair Nitrification Line Expansion PROPERTY LOCATION: Adams 121 SUBDIVISION PROPERTY FARMS Name: (owner) LOT # System Installer: Registration # Basement with plumbing: Garage 

Number of Bedrooms Type of Water Supply: 

Community Public Well Distance from well 100 feet System Type: \_\_\_ E- 7 F 100 1410 \_ 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. 12  $b_{s}$ 2 Daive 12 PERMIT CONDITIONS: Performance: System shall perform in accordance with Rule . 1961. II. Monitoring: As required by Rule .1961. 111. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes No K If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: Other: Following are the specifications for the sewage disposal system on the above captioned property.

Drainage Field ditches of each ditch feet ditches feet ditches feet ditches

Authorized State Agent Date Date Date

Septic Tank:

width of

gallons Pump Tank:

depth of

gallons

2 F/DW

exact length

Other L

Type of system: 
Conventional

No. of

Subsurface