HTE# 09-5-21799

## Harnett County Department of Public Health

20773

Operation Permit

	operation remite	
7	New Installation 🗵 Septic Tank 🗆 Repair 🗵 1  PROPERTY LOCATION: Macks 42	Vitrification Line   Expansion
Name: (owner) Cunsealand Homes Inc		
System Installer: LED BROWN		FOT # <i>15</i> /
	Registration #	
Basement with plumbing: Garage Number of Bedrooms	3	
Type of Water Supply:  Community Public Well	Distance from well 100 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 f	or permit renewal.
This system has been installed in compliance with applicable North Carolina General Statute	es, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Per	mit and Construction Authorization.
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	180 180	
	WYNNGATE DR	
PERMIT CONDITIONS:	The Ages	
I. Performance: System shall perform in accordance with Rule .196 II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:  Subsurface system operator required? Yes □ No lif yes, see attached sheet for additional operation  IV. Operation:	≼	
V. Other:		
Following are the specifications for the sewage disposal system on the above Type of system:  Conventional  Other  Ource 4  Ource	Septic Tank: 1000 gallons Pu width of	imp Tank: gallons depth of ditches _30 -18 inches
Authorized State Agent 7	RS Date 5/20/09	