

HTE# 09-5-23222

## Harnett County Department of Public Health

21033

PERMIT # 25704

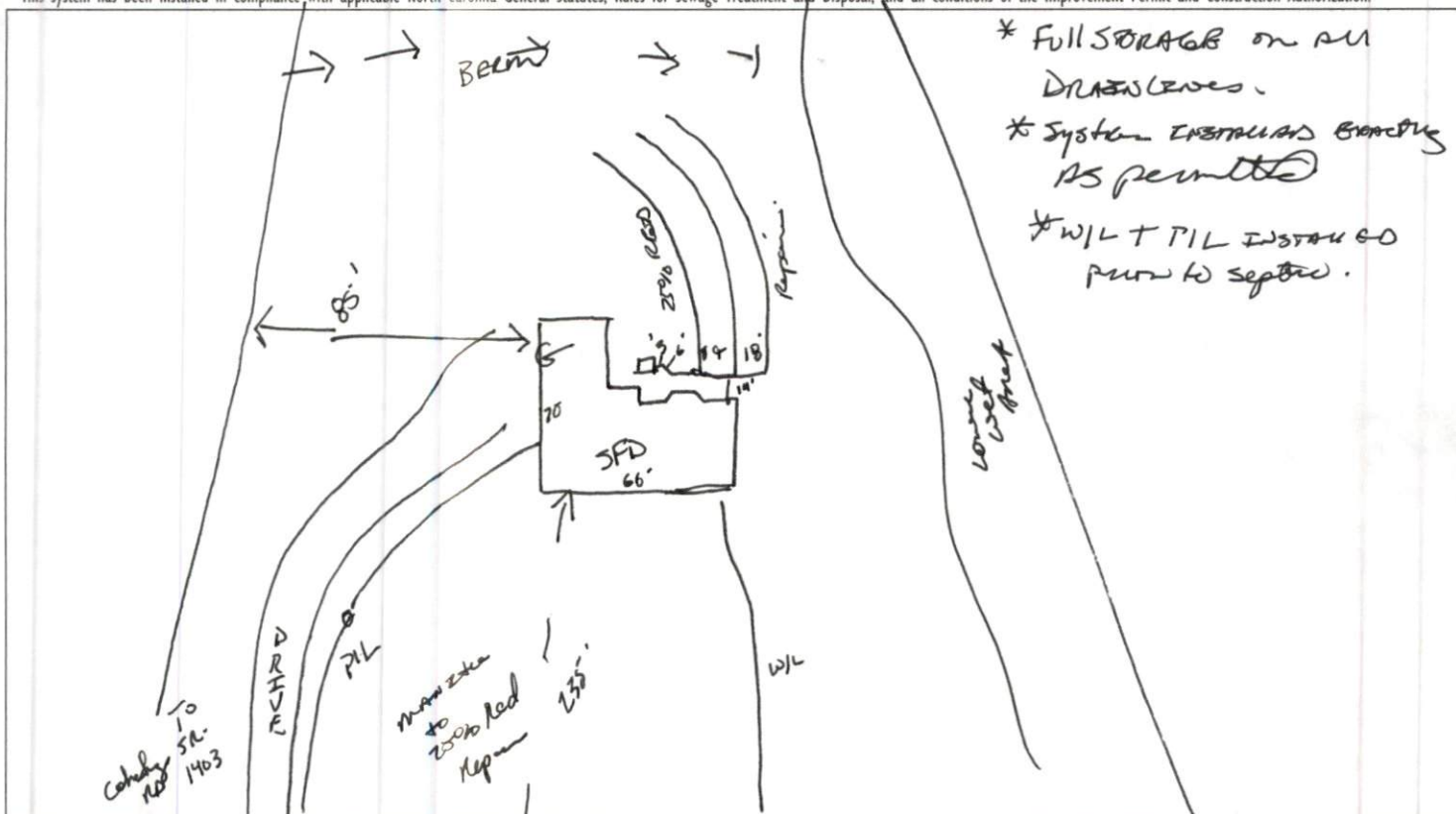
## Operation Permit

☒ New Installation ☒ Septic Tank ☐ Repair ☒ Nitrification Line ☐ ExpansionPROPERTY LOCATION: 5121403 CohaburyName: (owner) Robert + Mary Fayette Jr SUBDIVISION CAVERESS LOT # ASystem Installer: Jay Arcade Registration # \_\_\_\_\_Basement with plumbing: ☐ Garage ☒ Number of Bedrooms \_\_\_\_\_Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well \_\_\_\_\_ feetSystem Type: E2 FLOW - Type III G 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: \_\_\_\_\_

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

Type of system: ☐ Conventional ☒ Other 2596 REDUCTION E2 FLOWSubsurface No. of exact length  
Drainage Field ditches 3 of each ditch 80 feet

French Drain Required: \_\_\_\_\_ Linear feet

Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallonswidth of depth of  
ditches 3 feet ditches 30-18 inches

Authorized State Agent

James E. MartinDate 5-21-10