

HTE# 10-5-24486

Harnett County Department of Public Health

PERMIT # 26124

Operation Permit

21618

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: PONDEROSA TRAIL

Name: (owner) ANGELA LYON

SUBDIVISION CAROLINA SEASON

LOT # B18

System Installer: OTIS STRICKLAND

Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

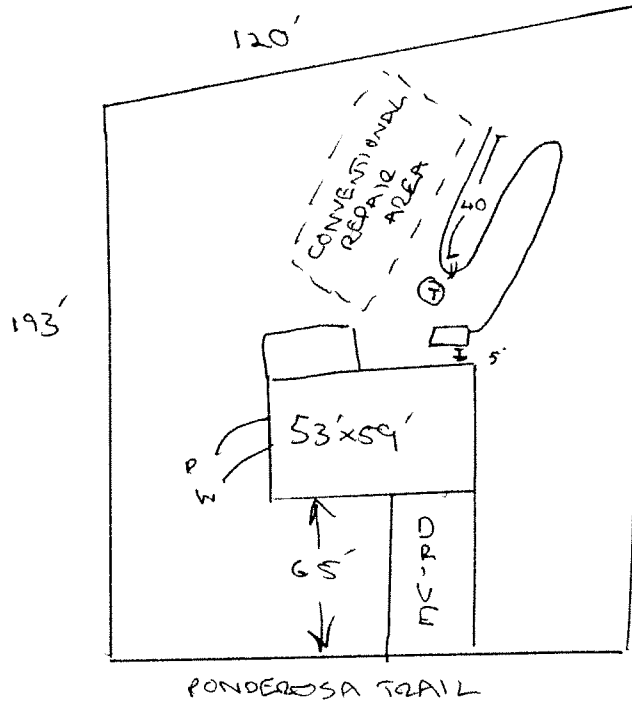
Type of Water Supply: Community Public Well Distance from well 100 feet

System Type: HHS 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: _____

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 EZ FLOW

Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 140 feet

width of ditches 3 feet depth of ditches 24-30 inches

French Drain Required: _____ Linear feet

Authorized State Agent _____

RENS

Date 9/7/10