HTE# 11-5-27741 Harnett Co	ounty Department of Public Health	
PERMIT # 26727	Operation Permit	22743
	New Installation Septic Tank Nitrification Line PROPERTY LOCATION: CAPOLESS CHURCH RO	Repair 🗆 Expansion
Name: (owner) DR Horrow Inc	SUBDIVISION CAPPERS POINTE	LOT # <u>5</u>
System Installer: JASON MATINEWS	Registration #	
Basement with plumbing: ☐ Garage ☐ Number of Bedrooms  Type of Water Supply: ☐ Community ☐ Public ☐ Well		
System Type:	Distance from well FOC feet  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.
71.		
this system has been installed in compliance with applicable North Carolina General Stat	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Cons	ruction Authorization.
0.55	Abortes CHURCH MJ)	
OA !	150	
315	Bures Jo Joseph Jag- 201	
	HIGHEREEN	
	POINT	
PERMIT CONDITIONS:		
$ \hbox{I.} \qquad \hbox{Performance:} \qquad \hbox{System shall perform in accordance with Rule} \ .$	1961.	
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other:	n 📈	

				H	GIA GREEN			
					P01~5	•		
PERM	IT CONDITIONS:							
I.	Performance:	System sha	ull perform in	accordance with Rule .1961.				
II.	Monitoring:	As required	by Rule .190	61.				
III.	Maintenance:	As required	d by Rule .196	61. Other:				
		Subsurface	system operat	or required? Yes 🗆 No 🔀				
		If yes, see	attached shee	t for additional operation conditions	, maintenance and	d reporting.		
IV.	Operation:							
v.	Other:	DEEP	PLUMBI	INC STUB MADE PULL	mp NECES	SSACY		
		D-Box		Pump 🗆	Aları	m 🗆	H20Line 🗆	PWR Line
Follow	ring are the speci	fications for	the sewage d	isposal system on the above caption	ed property.			
		Conventional	\overline \overline 0th	er Pump To EZF	~o`~'	_ Septic Tank: <u>10</u> ので	gallons Pump Tank: <u>100</u>	O gallons
Subsu	rface	No. of	_	exact length		width of	denth of	8
Draina	age Field	ditches	3	of each ditch	feet	ditches3	feet ditches 18	inches
French	ı Drain Required:			_ Limear feet				
							3 1	
Autho	orized State Ag	ent	1111		DEH2	Date _	1612	