

HTE# 12-5-28410

Harnett County Department of Public Health

PERMIT # 26903

Operation Permit

22186

- New Installation
 Septic Tank
 Nitrification Line
 Repair
 Expansion

PROPERTY LOCATION: Will Local Rd

Name: (owner) Atlantic Construction SUBDIVISION Sweetwater LOT # 4

System Installer: AAA Automotive Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

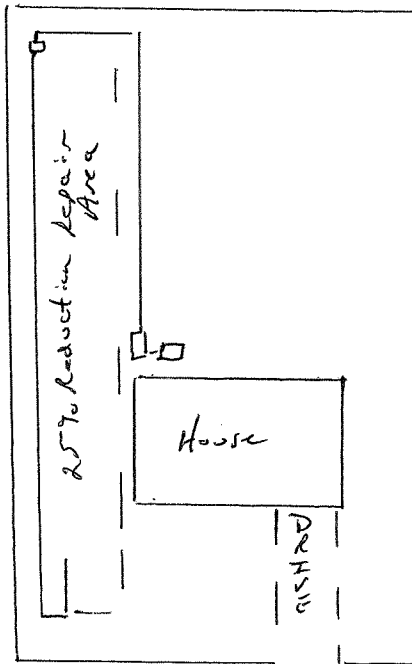
Type of Water Supply: Community Public Well Distance from well _____ feet

System Type: TII B 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.



* Supply line was run through repair, corrected on 4/13/2012

* End of drain line was crushed corrected on 4/13/2012

Hybrid hn

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 Ring to Quick 4 Chamber Septic Tank: 1000 gallons Pump Tank: 1000 gallons

Subsurface Drainage Field: No. of ditches 1 exact length of each ditch 200 feet width of ditches 3 feet depth of ditches 18-20 inches

French Drain Required: _____ Linear feet

Authorized State Agent

REMS

Date 4/19/12