HTE# 12-5-28457

Harnett County Department of Public Health

PERMIT # 2690)	Operation Permit	22185
	New Installation Septic Tank Nitrification Line	☐ Repair ☐ Expansion
	PROPERTY LOCATION: will Lucar Rd.	
Name: (owner) At lantic Construction	SUBDIVISION Sweetwater	LOT #
System Installer: AAA Automotive	Registration #	
Basement with plumbing: Garage Number of Bedrooms		
Type of Water Supply: 🗆 Community 🖾 Public 🗆 Well	Distance from well 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 for pern	nit renewal.
This system has been installed in compliance with applicable North Carolina General Sta	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and (Construction Authorization
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	fapoir Area	
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	Hose	
	l k	
PERMIT CONDITIONS:	HybridLone	
$ \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: Subsurface system operator required? Yes \ N		
If yes, see attached sheet for additional operat		
IV. Operation:	on conditions, maintenance and reporting.	
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V. Other:		
□ D-Box □ Pump	□ Alarm □ H20Line □	PWR Line
Following are the specifications for the sewage disposal system on the		, , , , , , , , , , , , , , , , , , , ,
Type of system: Conventional Other	Septic Tank: 1000 gallons Pump Ta	ank: gallons
Subsurface No. of exact length	h width of donth	of
Drainage Field ditches of each dit	ch 300 feet ditches feet ditches	inches
French Drain Required: Linear feet		
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Authorized State Agent	CC/D Date 4/13/20/	2_