HTE# 12-5-28485

Harnett County Department of Public Health

PERMIT # 269	Operation Permit	22346
	New Installation Septic Tank Nitrification Line PROPERTY LOCATION:	Repair Expansion
Name: (owner)	DIGNATURE Flome BUILDERS SUBDIVISION TRATTERS RIDGE	LOT # <u>¶2</u>
` '	Ons Speickland Registration #	
Basement with plumbi	ing: Garage Number of Bedrooms Garage	
Type of Water Supply:		
System Type:(In accordance with Ta	Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit	renewal
(in accordance men is	and the stay of the expiration for perint	renewal.
This system has been instal	lled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Con-	truction Authorization.
	REPAIR AREA CREPE MATERS HOUSE WHISPERZ LM	
PERMIT CONDITIONS: I. Performance:	System shall perform in accordance with Rule .1961.	
II. Monitoring: III. Maintenance:	As required by Rule .1961. As required by Rule .1961. Other:	
iii. iiuiiiciuiice.	Subsurface system operator required? Yes \(\square\$ No \(\square\$	
	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:		The same of the sa
V. Other:		
		PWR Line
Following are the spec	cifications for the sewage disposal system on the above captioned property.	
Type of system: 🗆	Conventional Other EZ FLOW Septic Tank: 1000 gallons Pump Tan	k: gallons
Subsurface	No: of exact length width of depth of ditches of each ditch 100 feet ditches feet ditches	
Drainage Field French Drain Required:	diteitsice diteitsice diteitsice	36~16 inches
Authorized State Ac		