HTE# 12-5-28676

## Harnett County Department of Public Health

PERMIT # 26987	Operation Permit	22340
	New Installation 🗵 Septic Tank 🗵 Ni	itrification Line 🗆 Repair 🗀 Expansion
0011	PROPERTY LOCATION: CHRUES C	MUNCH RD
Name: (owner) DR HORTON INC		LOT # 16
System Installer: JASON MATTHEMS	Registration #	
Basement with plumbing: ☐ Garage ☒ Number of Bedroor Type of Water Supply: ☐ Community ☒ Public ☐ Wel		
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 t	o 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.		
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	REPAIR  NETANDS  HOUSE  OLDE  CARCOS  POINT	
PERMIT CONDITIONS:  1. Performance: System shall perform in accordance with Ru	le .1961.	
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes	No Dr	
If yes, see attached sheet for additional opinion:	eration conditions, maintenance and reporting.	
V. Other:		
□ D-Box □ Pump	□ Alarm □	H20Line D PWR Line
Following are the specifications for the sewage disposal system on t	he above captioned property.	
Type of system: ☐ Conventional ☐ Other ☐ ☐ ☐ FLo Subsurface No. of exact le		gallons Pump Tank: gallons  depth of
Drainage Field ditches 5 of each	ditch 60 feet ditches 3	fact ditches 12 -18 inches
French Drain Required: Linear lest		BETON NOLASTIT CUED
Authorized State Agent	REMS Date _	6/21/12