HTE# 12-5-29567 Harnett County Department of Public Health	
PERMIT # 27152 Operation Permit 22	774
	Expansion
PROPERTY LOCATION: Docs KD	<u>щ 10</u>
Name: (owner) H+)-) CONSTRUCTORS LAC SUBDIVISION ORKMONT PM1 LOT System Installer: OT-3 STRUCKLAND Registration #	# _ 18
Basement with plumbing: 🗆 Garage 🔀 Number of Bedrooms 💾	
Type of Water Supply: Community Revealed Community Community Revealed	
(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.	
313	
51	
15×7 10 POSE	
HOUSE	
37' 2	
V Ž	
i oo'	
EXECUTIVE DR	
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:	
Y. Other:	
D-Box Pump Alarm H20Line H20Line	PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.	
Type of system: 🗆 Conventional 🛛 🗶 Other <u>EZ Fíww</u> Septic Tank: <u>1000</u> gallons Pump Tank:	gallons
Subsurface No. of exact length width of depth of Drainage Field ditches <u>3</u> feet ditches <u>18-22</u>	inches
French Drain Required: Linear feet	· · · · · · ·
Authorized State Agent Date 1/22/13	