| HTE# 13-5-30786 Harnett County Department of Public Health | |
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| PERMIT # 27405 Operation Permit 22549 | |
| Roperty Location: Cyreess Church B | sion |
| PROPERTY LOCATION: CYPRESS CHURCH B | |
| Name: (owner) DR HERRON INC SUBDIVISION CARRESS POINTE LOT # 30 System Installer: JASON MATTINENS Registration # | _ |
| Basement with plumbing: Garage X Number of Bedrooms | |
| Type of Water Supply: 🗆 Community 🔯 Public 🗆 Well Distance from well <u>100</u> 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 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. | |
| CYPRESS CHURCH RD | |
| And Repaired | |
| HONEY BROOK CT | |
| | |
| | |
| 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 □ H20Line □ PWF | R Line |
| Following are the specifications for the sewage disposal system on the above captioned property. Type of system: ロ Conventional ズズ Other <u>EZ デーロック</u> gallons Pump Tank: gallons Pump Tank: gallons Pump | lara |
| Subsurface No. of exact length width of depth of | 0112 |
| Drainage Field ditches of each ditch _200 feet ditches feet ditches inches French Drain Required: Linear teet | |
| |] |
| Authorized State Agent Date Date Date | |