HTE# 14-5-32°(3)

Harnett County Department of Public Health

23300

| PERMIT # 276 | Operation Permit | | |
|---|---|----|--|
| | New Installation 🗵 Septic Tank 🛣 Nitrification Line 🗆 Repair 🗆 Expansion | n | |
| _ | PROPERTY LOCATION: PONDEILOSE RA | _ | |
| Name: (owner) | LUMBERIANO HOMES INC SUBDIVISION CAROLINA SEASONS LOT # 17 | | |
| | TED BOOM Registration # | | |
| Basement with plumbir | ing: Garage Number of Bedrooms Public Well Distance from well Public Well Distance from well Public Stance from Well Stance from well Public Stance from Well Stance from | | |
| System Type: | | | |
| (In accordance with Ta |) | | |
| The contraction of the Improvement Permit and Contraction Authorization | | | |
| This system has been installed | lled 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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| | TRUMERNA, | | |
| | AREA | | |
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| | 16 713 | | |
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| | ROFIZEWAY | | |
| | Basissand | | |
| | Y | | |
| | | | |
| PERMIT CONDITIONS: | 54' | | |
| 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 \(\sigma\) No | | |
| IV. Operation: | If yes, see attached sheet for additional operation conditions, maintenance and reporting. | | |
| it. Operation. | | | |
| V. Other: | | | |
| | D-Box | ne | |
| | cifications for the sewage disposal system on the above captioned property. | | |
| Type of system: | | i | |
| Subsurface Drainage Field | No. of exact length width of depth of ditches $\frac{18-32}{}$ inches | | |
| French Drain Required; | | | |
| • | | _ | |
| Authorized State Ag | gent Date 6914 | | |