HTE# <u>14-5-3587</u> 5 Harnett County Department of Public Health 23405	
PERMIT # 2300 G Operation Permit	
New Installation Repair Septic Tank Nitrification Line Repair E PROPERTY LOCATION: CHERRY HILLOR	xpansion
Name: (owner) MCKEE HOMES LLC SUBDIVISION OAKMONT LOT # 1	49
System Installer: <u>Epore Garner</u> Registration #	
Basement with plumbing: 🗆 Garage 🔀 Number of Bedrooms L Type of Water Supply: 🗆 Community 😥 Public 🗆 Well Distance from well LCCC 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.	
100'	
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REPAIR	
ARA	
1	
187-	
HOUSE	
V Z	
CHELON HILLOR	
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 □	PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.	
Type of system: Conventional X Other <u>CHAMBER QH</u> Septic Tank: <u>1000</u> gallons Pump Tank: Subsurface No. of exact length width of depth of	_ gallons
SubsurfaceNo. ofexact lengthwidth ofdepth ofDrainage Fieldditches 100 feetditches 300 feetditches	ches
French Drain Required	i
Authorized State Agent Date 10/612	