HTE# 14-534715

Authorized State Agent

Harnett County Department of Public Health

23621

PERMIT # 28/55 **Operation Permit** New Installation Septic Tank Nitrification Line Repair Expansion PROPERTY LOCATION: TILDEN HOMINGTON DR SUBDIVISION MAMIE BELL RIOCE SAVY HOMES INL System Installer: __ Registration # Garage Mumber of Bedrooms Basement with plumbing: Type of Water Supply:

Community

Public

Well Distance from well 100 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. ငေဂ် G7 ' REPAIR 236 HOUSE R TILDEN HOWINGTON OR PERMIT CONDITIONS: 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: ٧. Other: Pump □ Alarm □ D-Box H20Line □ **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property.

Type of system:

Conventional Other EZ FLOW Septic Tank: 1000 gallons Pump Tank: gallons Subsurface width of exact length depth of Drainage Field of each ditch feet ditches French Drain Required. Linear feet