HTE# 15-5-36199@ Harnett County Department of Public Health 23975	
PERMIT # 28340 Operation Permit	
🔀 New Installation 🕱 Septic Tank 🔀 Nitrification Line 🗆 Repair 🗆 E	xpansion
PROPERTY LOCATION: 121 STORLICITS DR	
Name: (owner) BUCHANAN ROOFINC SUBDIVISION NEW HORIZONS LOT # 17	2
System Installer: Garage K Number of Bedrooms Registration #	
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.	2000-00-00-000
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STARLIGHT DRIVE	
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 Karal Structure 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 EZFLOW Septic Tank: 1000 gallons Pump Tank:	_ gallons
Subsurface No. of exact length width of depth of Drainage Field ditches 1 of each ditch 225 feet ditches 3 feet ditches 18'30 in	iches
French Drain Required:	
stel	
Authorized State Agent Date 3916	