| HTE# 16-5-36539 Harnett County Department of Public Health 23989  |
|---|
| PERMIT # 28520 Operation Permit   |
| New Installation Repair Cank Nitrification Line Repair Expansion<br>PROPERTY LOCATION: Division Co  |
| Name: (owner) BILL CLARK HOMES SUBDIVISION PATIONS POINT LOT # 27   |
| System Installer: Society C Registration #  |
| Basement with plumbing: 🗆 Garage 🔀 Number of Bedrooms <u>3</u>  |
| Type of Water Supply: $\Box$ Community $H$ Public $\Box$ Well Distance from well $\frac{1000}{Types}$ feet<br>System Type: Types V and VI Systems expire in 5 years   |
| System Type: Types V and VI Systems expire in 5 years.<br>(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.   |
| ,56,  |
|   |
|   |
|   |
|   |
|   |
| HOUSE 150'  |
|   |
|   |
|   |
|   |
| lé line   |
|   |
| E ETY I REPAIR  |
| CALIBER   |
| 02  |
|   |
|   |
| PERMIT CONDITIONS:  |
| I. Performance: System shall perform in accordance with Rule .1961.<br>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   PWR Line  |
| Following are the specifications for the sewage disposal system on the above captioned property.<br>Type of system: $\Box$ Conventional $\Delta$ Other <u>CHAMBOR</u> $\Delta^2$ gallons Pump Tank: <u>1000</u> gallons Pump Tank: <u>1000</u> gallons  |
| Subsurface No of avact langth width of danth of   |
|   |
| French Drain Required: Linear feet  |
| Authorized State Agent Date 7/2)6   |
| incurrence agent and addition of the second and the second addition of the second addition |