Harnett County Department of Public Health

24661

PFRMIT # 29321

Operation Permit

1 EMIN # _01 .301.	operation remit
	New Installation
	PROPERTY LOCATION: 450 Cross Link Dr. (Chalybeak So- Ob. 52 15
Name: (owner) Confort Homes, Inc	SUBDIVISION Cross Light Place LOT # 9
System Installer: Russel Phillips	Registration #
Basement with plumbing: Garage Number of Bedrooms	3
Type of Water Supply: Community Public Well	
System Type: 25% reduction 5ys- 14	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 Sta	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
192	4
12	PUMP TO #88ft from SFD to D-Box
14	250 REDUCTION
	REPAIR
	AREA
	130
	2 Continued to the state of the
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Ca	LOSS LINK DRIVE
PERMIT CONDITIONS:	OS CHOIC BELLOW
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 N	0 🗆
If yes, see attached sheet for additional operati	ion conditions, maintenance and reporting.
IV. Operation:	
Y. Other:	
□ D-Box □ Pump	□Alarm □ H20Line □ PWR Line
Following are the specifications for the sewage disposal system on the	
Type of system: Conventional Other Institutor	Chamber 1110 Septic Tank: 1000 gallons Pump Tank: 1000 gallons
Subcurface No of	0
	ch 90 feet ditches 3 feet ditches 18-24 inches
French Drain Required: Linear feet	The ditties of the littles
12-11	
Authorized State Agent	Date 08/28/2017
number state ngent	vale