HTE# 17-5-40820

## Harnett County Department of Public Health

24533

PERMIT # 21423

Operation Permit

| operation remit   |
|---|
| New Installation Septic Tank Mitrification Line  Repair  Expansion  |
| Name: (owner) ATLANTIC CONST. LNL SUBDIVISION SWEETVERER LOT # 37   |
| Name: (owner) ATLANTIC CONST. LOW SUBDIVISION SWEETWATER LOT # 37   |
| System Installer: HAZOIN DERT C Registration #  |
| Basement with plumbing: Garage Number of Bedrooms   |
| Type of Water Supply:   Community   Public   Well Distance from well 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.  |
| (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. |
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| PERMIT CONDITIONS:  |
| 1. 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: No HOUSE ON SITE FOUNDATION ONLY  |
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| Following are the specifications for the sewage disposal system on the above captioned property.  Type of system:   Conventional Conventional Septic Tank: 1000 gallons Pump Tank: gallons                          |
| · · · · · · · · · · · · · · · · · · ·   |
| Subsurface No. of exact length width of depth of Drainage Field ditches of each ditch 270 feet ditches 3 feet ditches 48-55 inches  |
| French Drain Required: Linear feet  |
| L. Bull J.  |
| Authorized State Agent Date 4 1247  |
| Date 1101.  |