HTE# 18-5-4300 Harnett County Department of Public Health 25082	
PERMIT # 39830 Operation Permit	
\boxtimes New Installation \boxtimes Septic Tank \boxtimes Nitrification Line \square Repair \square Ex	
PROPERTY LOCATION SPRANCE DAVID COMPANY	pansion
Name: (owner) HOME DUILOEZS SUBDIVISION LOT # 2	
System Installer: <u>GENES BACKHOG</u> Registration #	
Basement with plumbing: Garage K Number of Bedrooms 4 Type of Water Supply: Community K 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.	
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:	
I. Performance: System shall perform in accordance with Rule .1961. II. Monitoring: As required by 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:	
□D-Box □Pump □Alarm □H20Line □P	WR Line
Following are the specifications for the sewage disposal system on the above captioned property.	
Type of system: Conventional Conventional Other E2FLOW Septic Tank: 1000 gallons Pump Tank: gallons Pump Tan	gallons
Subsurface No. of exact length width of depth of Drainage Field ditches 3 feet ditches 3 feet ditches 18 inches	24
French Drain Required: linear feet	
Authorized State Agent Date 613 18	

