25308

PERMIT # 29913 **Operation Permit** PROPERTY LOCATION: 2190 Matthews Rd. (SR 1436) LOT # i Name: (owner) Southern Touch Homes, uc SUBDIVISION System Installer: Cline Registration # Basement with plumbing: Garage Number of Bedrooms ☐ Well Distance from well A feet Type of Water Supply: 

Community 2 Public \_\_\_\_\_\_ Types V and VI Systems expire in 5 years. System Type: 25% Owner must contact Health Department 6 months prior to expiration for permit renewal. (In accordance with Table V a) 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. INSTALL : 01/18/2019 PLA 3 02/08/2019 D 2 PERMIT CONDITIONS: System shall perform in accordance with Rule .1961. Performance: 1. II. As required by Rule .1961. Monitoring: III. As required by Rule .1961. Other: \_\_\_ Maintenance: Subsurface system operator required? Yes 
No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: **PWR Line** H20Line □ D-Box Pump Alarm Following are the specifications for the sewage disposal system on the above captioned property. Other EZ FION JILL Septic Tank: 2000 gallons Pump Tank: 1000 gallons Type of system: 

Conventional width of depth of exact length Subsurface No. of 3 of each ditch \ \ \ \ \ \ \ feet ditches inches ditches ditches Drainage Field French Drain Required: 02/08/2019 Date Authorized State Agent <

HTE#196-5-4346ACR Harnett County Department of Public Health