HTE# 18-544117

Harnett County Department of Public Health

No. 2603 I

PERMIT # 3012L)

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expans	sion
Name: (owner) Brass Cummings SUBDIVISION LOT #_	_
Name: (owner) Brand Cummings SUBDIVISION LOT # System Installer: ELVIS FRIZZIOTH 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.	
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.	
FUTURE STACTO ASS. ACCOMPANY REPART RECALL RECAL	
LEAFLET CHURCY 8D.	
PERMIT CONDITIONS:	
 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 🗆 No 🔀	
If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:	
V. Other:	
□ D-Box □ Pump □ Alarm □ H20Line □ PWR	Line
Following are the specifications for the sewage disposal system on the above captioned property.	
Type of system: Conventional Other Changes (Changes) Septic Tank: 1000 gallons Pump Tank: gallo	ns
Subsurface No. of exact length width of depth of Drainage Field ditches 1 feet ditches 3 feet ditches 18 inches	
Drainage Field ditches of each ditch feet ditches feet ditches inches inches French Drain Required: Linear feet	
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Authorized State Agent Date Date Date	