HTE# EH1906-000d Harnett County Department of Public Health 25643
PERMIT # Operation Permit 20010
Name: (owner) Sharcalyn & Mory Sulfiger SUBDIVISION Cresture Estato LOT # 1600 System Installer: Cox Septic & Gooding Registration # Registration # Registration # Registration # Registration # Feet System Type of Water Supply: Community Public Well Distance from well feet System Type: 25% reduction System 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.
STAL SPRING DA # SHALLOW ON MICHT SIDE ADDITIONAL SO SHIFTED TO GIVE
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 Lin
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other Ext gallons Pump Tank: Septic Tank: width of depth of depth of Drainage Field ditches Inches French Drain Required: Linear feet Linear feet
Authorized State Agent O7/61/2019