

HTE# EH 2009-0204

Harnett County Department of Public Health

No. 26650

PERMIT # _____

Operation Permit

- New Installation
 Septic Tank
 Nitrification Line
 Repair
 Expansion

PROPERTY LOCATION: 541758 JOB COLLETS RD

Name: (owner) Hope Beharow SUBDIVISION Mitchell Pond Est LOT # 1

System Installer: Shawn Cox Registration # _____

Basement with plumbing: Garage Number of Bedrooms 2

Type of Water Supply: Community Public Well Distance from well _____ feet

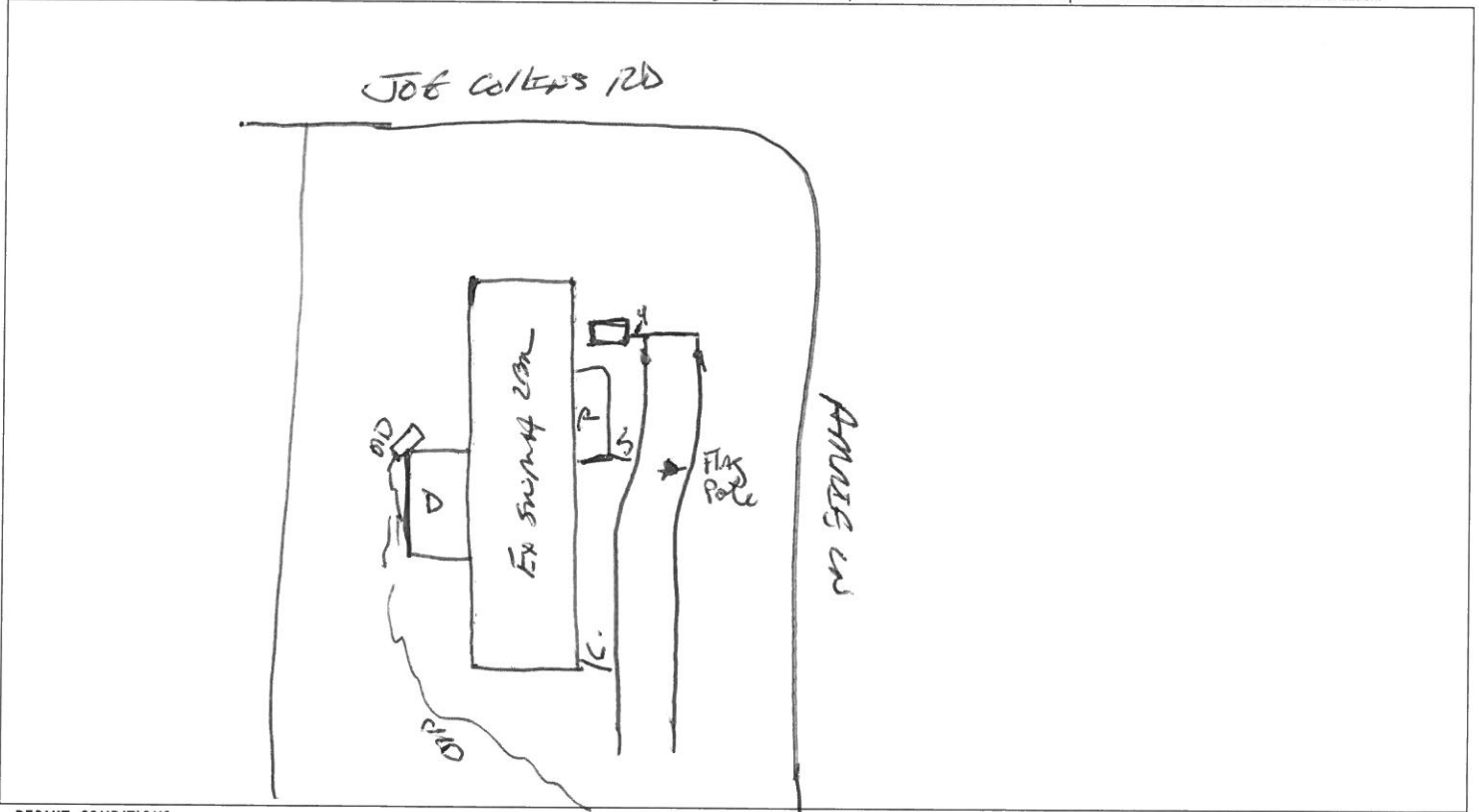
System Type: 25% Reducation System Type 6 Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

Owner must contact Health Department 6 months prior to expiration for permit renewal.

Charter Work

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.



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 H2O Line PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other 25% Reducation Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field: No. of ditches 2 exact length of each ditch 82 feet width of ditches 3 feet depth of ditches 24-18 inches

French Drain Required: _____ Linear feet

Authorized State Agent James E. Manshan PHHS Date 10-20-20