

Harnett County Department of Public Health

PERMIT # FH2307-0014

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: SR 1419 Arvey Spence

Name: (owner) Geraldine Truelove SUBDIVISION _____ LOT # _____

System Installer: Adcock Excavation

Basement with plumbing: Garage Number of Bedrooms 3

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

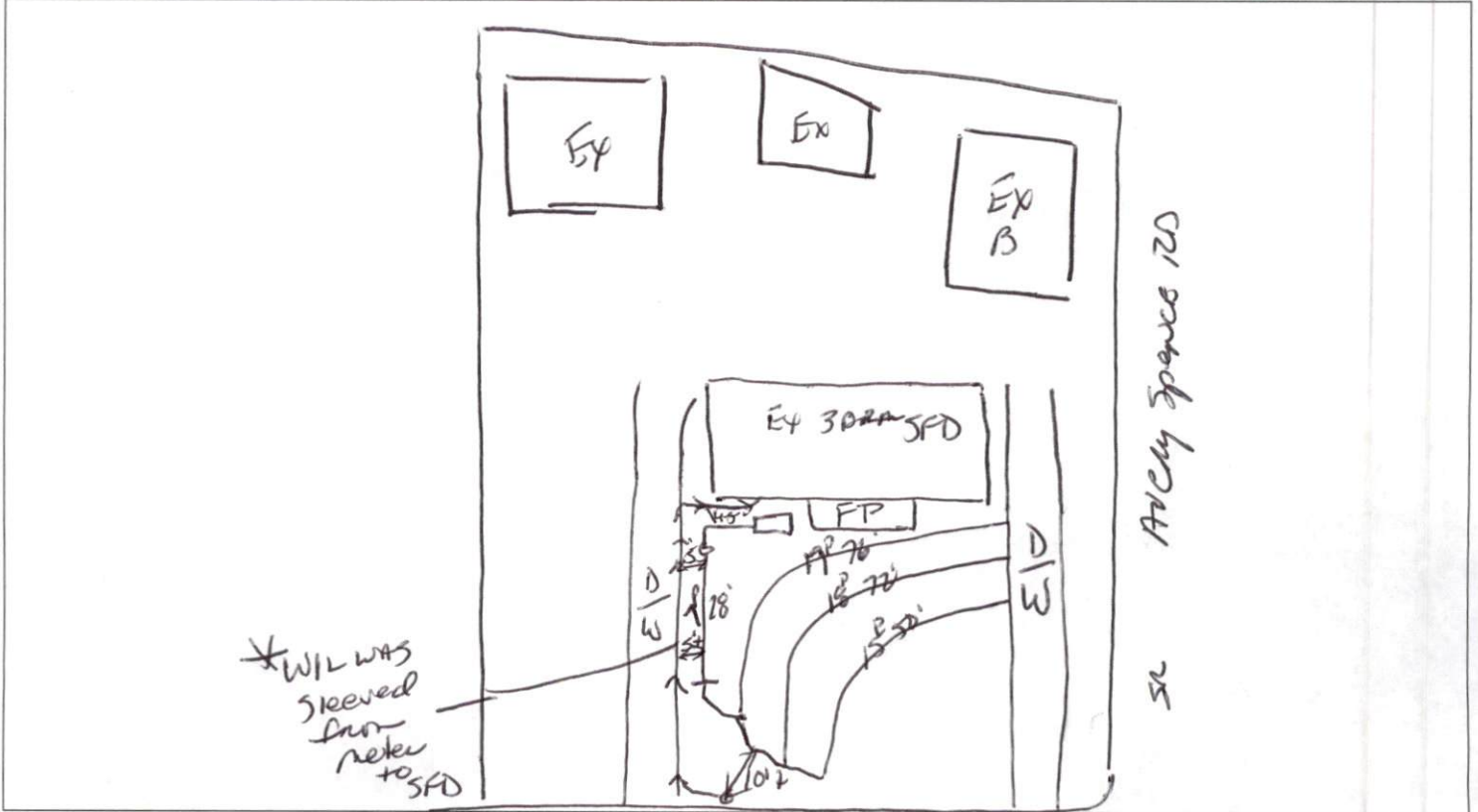
System Type: 25% RESTRICTION System Type Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

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

11' 6" Chamber

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.
- 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: _____

SR OAKRIDGE RIVER RD

_____ 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% RESTRICTION Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface Drainage Field: No. of ditches 1 exact length of each ditch 236 feet width of ditches 3 feet depth of ditches 22-18 inches
 French Drain Required: _____ Linear feet

Authorized State Agent James E. Marshall JR Date 10-19-23