HTE# 15-5-35495

Harnett County Department of Public Health

23639

PERMIT # 283)9

Operation Permit 🛛 New Installation 🖾 Septic Tank 💢 Nitrification Line 🗆 Repair 🗆 Expansion PROPERTY LOCATION: MERCEDES LN SUBDIVISION WESTOOD LOT # GR Name: (owner) ROBER System Installer: ___ SHAPPE Registration # _____ Basement with plumbing: Garage

Number of Bedrooms _ Type of Water Supply:

Community _ Types V and VI Systems expire in 5 years. System Type: ___ (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. MERCEDES PERMIT CONDITIONS: Performance: System shall perform in accordance with Rule .1961. II. As required by Rule .1961. Monitoring: 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: No Home ON SITE ASTIME OF INSTALLATION V. Other: □ ______Pump □ ______H20Line □ **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. Type of system:

Conventional Other Type Chief Septic Tank: 1000 gallons Pump Tank: _____ gallons Subsurface No. of exact length width of depth of ditches 20 30 inches ditches Drainage Field of each ditch French Drain Required: Linear feet Authorized State Agent