

HTE# 14-5-33548

Harnett County Department of Public Health

23472

PERMIT # 27873

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

Feliciano + Melissa Avdeez

PROPERTY LOCATION: Hwy 42

Name: (owner) Bobby STARS JR

SUBDIVISION STONE MASON

LOT # 6

System Installer: JAY AXOCK Excavations

Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

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

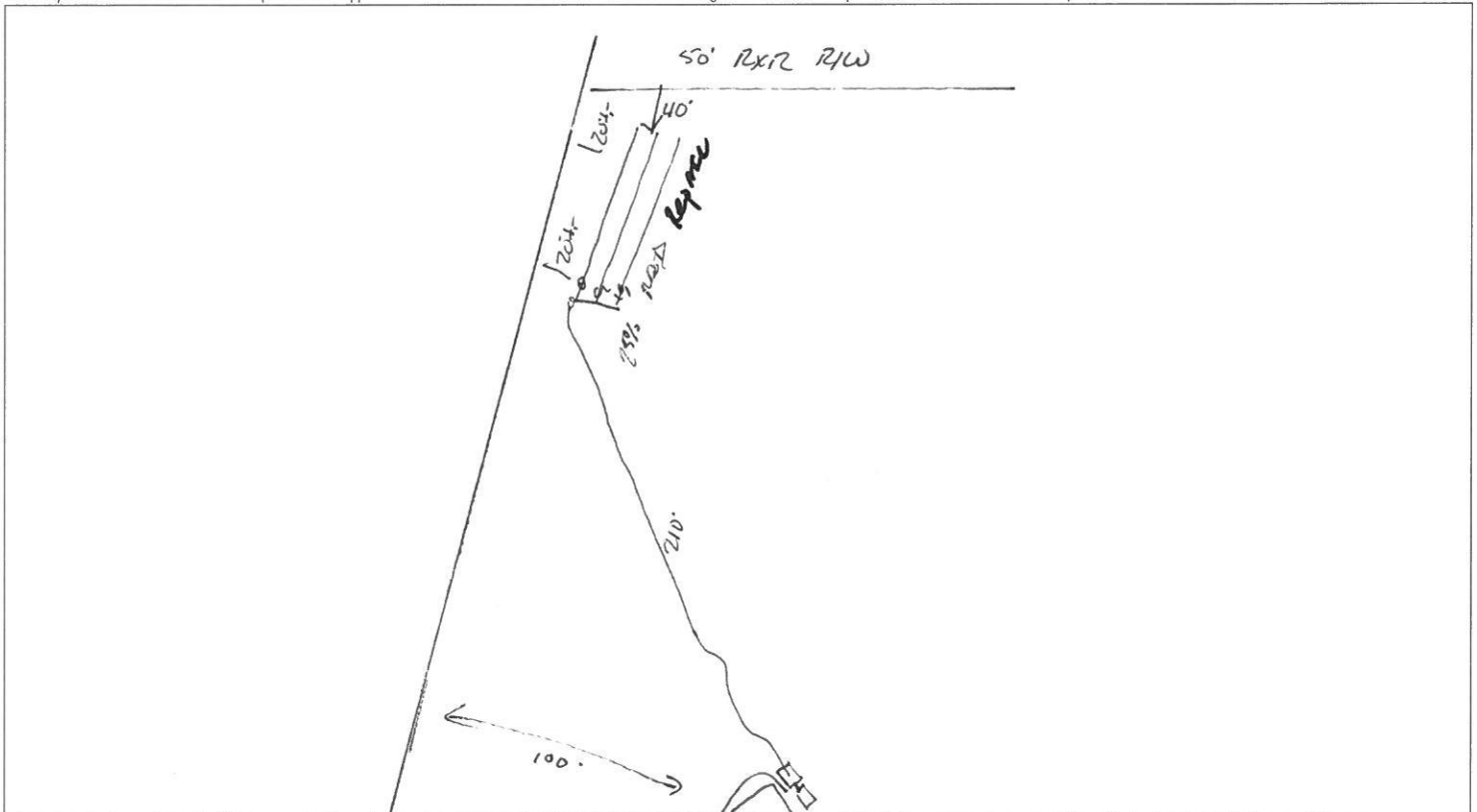
System Type: Pump to 25% REDUCED System Type II B Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

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

ERL

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 OK
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 Pump to 25% REDUCED Septic Tank: 1000 gallons Pump Tank: 1600 gallons

Subsurface No. of exact length width of depth of
Drainage Field ditches 3 of each ditch 80 feet ditches 3 feet ditches 24-26 7/8 inches

French Drain Required: _____ Linear feet

Authorized State Agent Jane E. Mandant

Date 12-28-75