05/01/2019

Date _

HTE# 18-5-	44458 Harnett County Department of Public Health 2540	1	
PERMIT #30	Operation Permit St	15759	
	New Installation	Expansion	
Names (auran)	Tra Scott Mathey SUBDIVISION TRiver Crest LOT#	Tye MJ S	
	Cory Gilbert Subdivision # LOT #	7	
Basement with plumbing: Garage Number of Bedrooms 3			
Type of Water Supply: Community Public Well Distance from well A feet 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.			
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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DEDUCE COURTERING	PUMP STATION RD.		
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 H20Line	PWR Line	
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other Other Other Septic Tank: Septic Tank: gallons Pump Tank: gallons			
Subsurface	No. of exact length width of depth of		
Drainage Field French Drain Required:	ditches 4 of each ditch 58 feet ditches 3 feet ditches 18-22	inches	
ricicii Diani Nequired:	Lilical Icet		

Authorized State Agent____