HTE# SFD1902-0026

Authorized State Agent\_

## Harnett County Department of Public Health

25493

IIIC# 31 71 70a cons	uncti county bepartment of rubit health	
PERMIT # NA	Operation Permit	521513
	🛛 New Installation 🗷 Septic Tank 屎 Nitrificati	on Line 🗆 Repair 🗆 Expansion
	PROPERTY LOCATION: 22 Treasure D	x ( weills CK Md.)
Name: (owner) Combestand House	es in . SUBDIVISION South Creak	
System Installer: Avila Const	Registration #	
Basement with plumbing:  Garage  Number	er of Bedrooms	
Type of Water Supply:   Community Public	: Well Distance from well feet	
System Type: 25% reduction	Types V and VI Systems expire in 5 years.	
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to expirat	tion 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	nt Permit and Construction Authorization.

12' S' 2' STD	25%0   NEDX 716 N)    NEPAIR AND    145'  40'  12' 45'  40    381 SFD	*NO PORTH OR PATIO AT TIME OF TROSTACK
	PID	As the second se
PERMIT CONDITIONS:	EASURE ON VE	
Performance: System shall perform in accordance	EASS TE DIT	

11.	Monitoring:	As require	d by Rule .1961.						
III.	Maintenance:	As required by Rule .1961. Other:							
		Subsurface	system operator	required? Yes 🗆 No 🕱					
		If yes, see	attached sheet fo	or additional operation condition	s, maintenance a	nd reporting.			
IV.	Operation:	· · · ·							_
									_
٧.	Other:					****			_
		_ D-Box		Pump 🗆	Alc	ırm 🗆	H20Line		PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.									
	of system:			EZ Flow		Septic Tank:	1000 gallons	Pump Tank:	gallons
Subsu	rface	No. of		exact length	_ J	width of		depth of	· ·
Draina	age Field	ditches		of each ditch 22	S feet	ditches	feet	ditches $24$	inches
French	n Drain Required:		1	Linear feet					