

HTE# SFD1902-0044

# Harnett County Department of Public Health

25659

PERMIT # NA

## Operation Permit

New Installation  Septic Tank  Nitrification Line  Repair  Expansion

PROPERTY LOCATION: 141 Old Barn Way (Christen Ct. Rd)

Name: (owner) KB Homes Carolina SUBDIVISION Mason Pointe LOT # 46

System Installer: Thornton Plumbing Registration # \_\_\_\_\_

Basement with plumbing:  Garage  Number of Bedrooms 5  
Type of Water Supply:  Community  Public  Well Distance from well NA feet

Flow reduction? 480GPD MAX

System Type: 25% reduction sys. IIIg Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

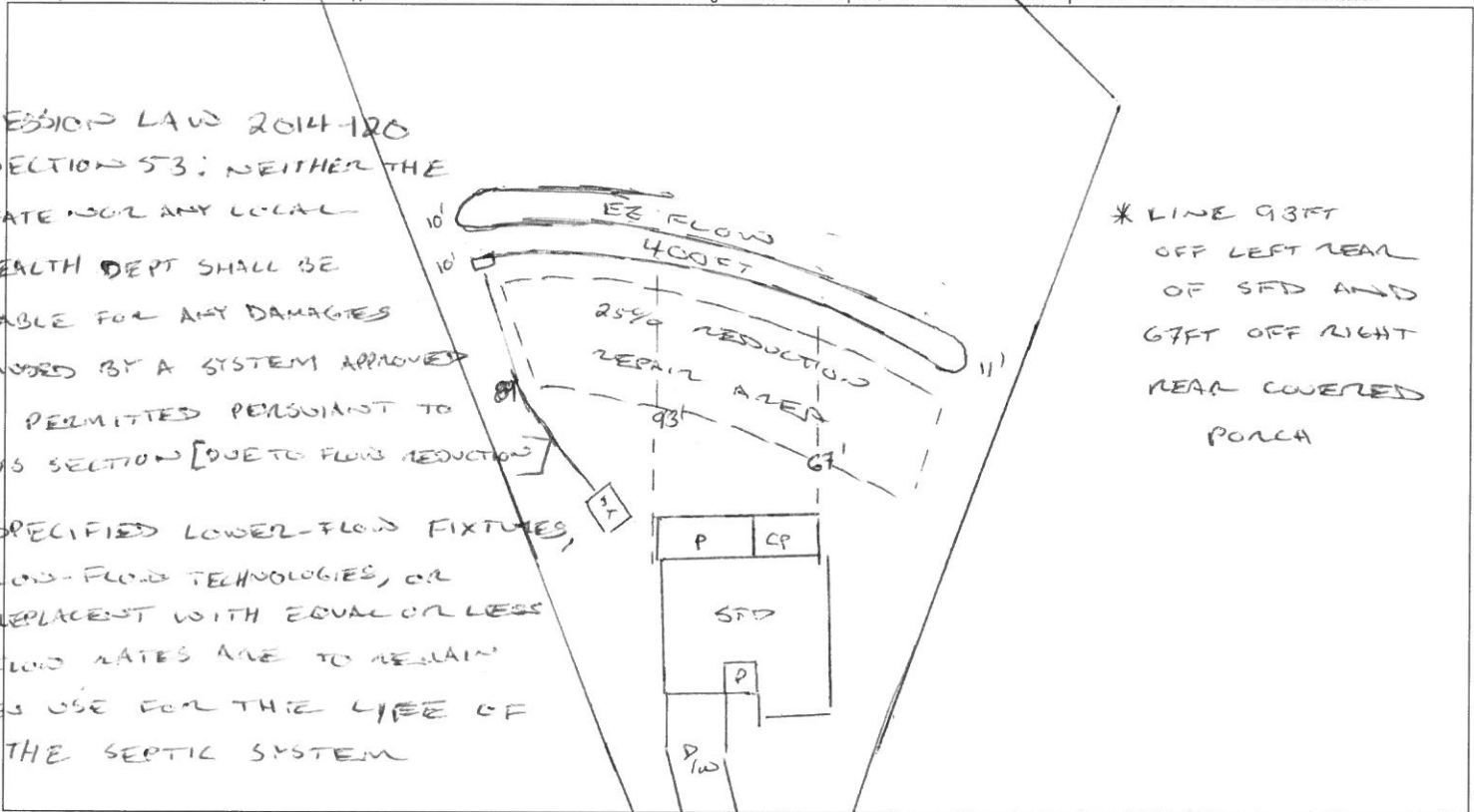
Owner must contact Health Department 6 months prior to expiration for permit renewal.

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.

\*SESSION LAW 2014-120  
SECTION 53: NEITHER THE  
STATE NOR ANY LOCAL  
HEALTH DEPT SHALL BE  
LIABLE FOR ANY DAMAGES  
CAUSED BY A SYSTEM APPROVED  
OR PERMITTED PURSUANT TO  
THIS SECTION [DUE TO FLOW REDUCTION]

\*SPECIFIED LOWER-FLOW FIXTURES,  
LOW-FLOW TECHNOLOGIES, OR  
REPLACEMENT WITH EQUAL OR LESS  
FLOW RATES ARE TO REMAIN  
IN USE FOR THE LIFE OF  
THE SEPTIC SYSTEM

\*LINE 93FT  
OFF LEFT REAR  
OF SFD AND  
67FT OFF RIGHT  
REAR COVERED  
POUCH



### 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  H2O Line  PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system:  Conventional  Other EZ FLOW IIIg Septic Tank: 1250 gallons Pump Tank: \_\_\_\_\_ gallons  
 Subsurface No. of exact length width of depth of  
 Drainage Field ditches 1 of each ditch 400 feet ditches 3 feet ditches 24 inches  
 French Drain Required: \_\_\_\_\_ Linear feet

Authorized State Agent [Signature] Date 10/08/2019