Harnett County Department of Public Health HTE# 5F71903-0038 25647 Operation Permit PERMIT # _ 30434 PROPERTY LOCATION: Chary heate nd. (Sr. 1429) Name: (owner) _ LGI Hones SUBDIVISION ____ LOT # 178 System Installer: Quality septic Registration # Garage Number of Bedrooms Basement with plumbing: Type of Water Supply:
Community Public
Well Distance from well ____A 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 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. 30 10 332 SFD

PERMIT CONDITIONS:										
1.	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:			•						
						50 anning (min)	10 Ac			
٧.	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 OH Charake III Septic Tank: 1600 gallons Pump Tank:								gallons		
Subsur	face	No. of		exact length		width of		0	depth of	0
Draina	ige Field	ditches	<u>a</u>	of each ditch	120 feet	ditches _	-3	_ feet	ditches 22+18	inches
French Drain Required: Linear feet										
						_				
Authorized State Agent O7 03 2019										

Authorized State Agent_____