

HTE# SFD 1904-0005

Harnett County Department of Public Health

25462

PERMIT # 30446

Operation Permit

- New Installation
 Septic Tank
 Nitrification Line
 Repair
 Expansion

PROPERTY LOCATION: SA 1479 Chalybeate RD

Name: (owner) LGI Homes SUBDIVISION Avery Pond LOT # 48

System Installer: Quality Septic Registration # _____

Basement with plumbing: Garage Number of Bedrooms _____

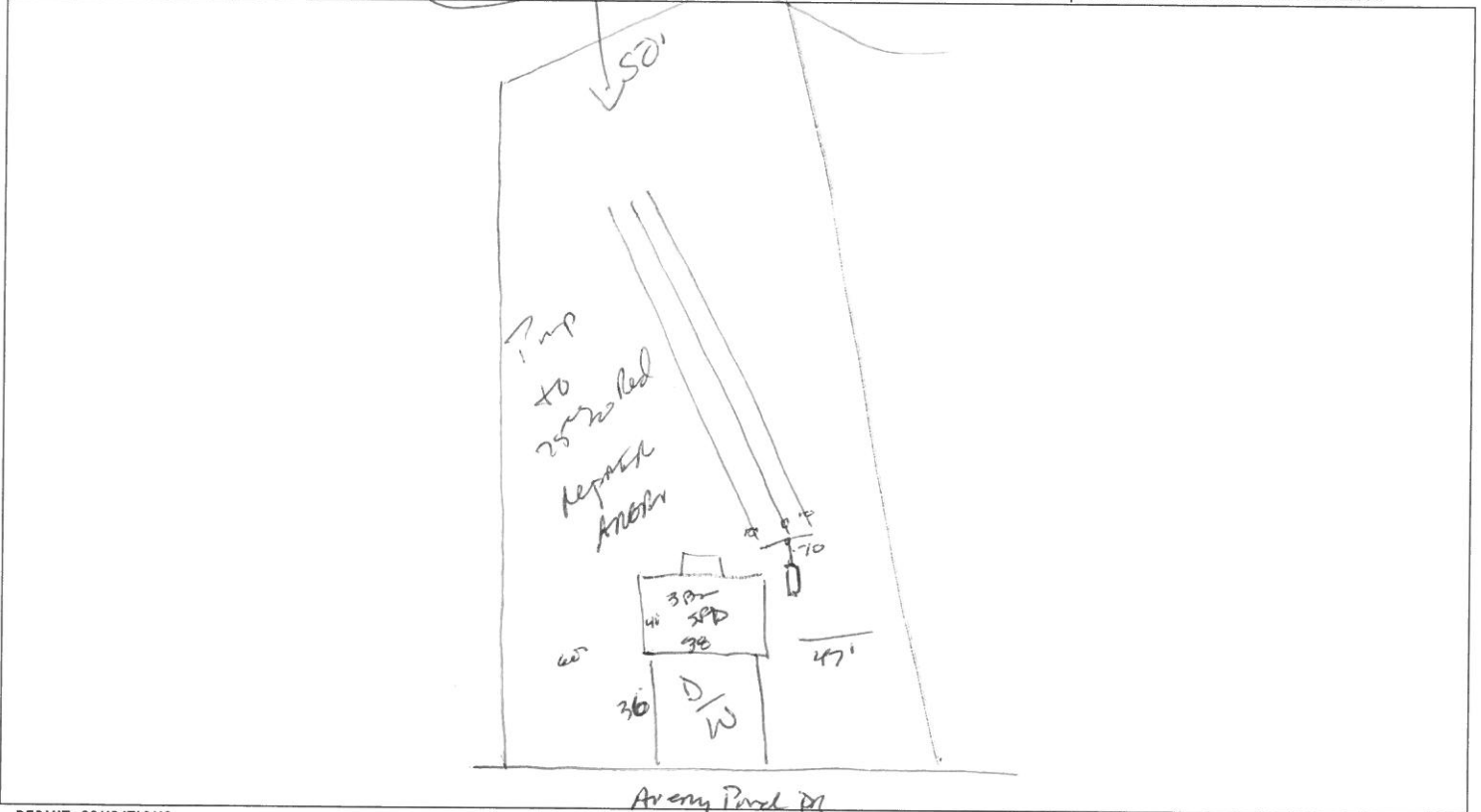
Type of Water Supply: Community Public Well Distance from well _____ feet

System Type: 25% reduction system Type II G chamber 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.



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 25% RED Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface No. of exact length width of depth of

Drainage Field ditches 3 of each ditch 100 feet ditches 3 feet ditches 22-18 inches

French Drain Required: _____ Linear feet

Authorized State Agent James E. Marshall Date 8-27-19