HTE#\_5771905-0037

## Harnett County Department of Public Health

No. 26254

1.

**Operation Permit** PERMIT # ~ Cx 52 1412 Mew Installation M Septic Tank M Nitrification Line Repair Expansion PROPERTY LOCATION: 14G RAIDLS MENTES LAS. (CHRISTIAN CTAS) Name: (owner) KB HOMES CAROLING SUBDIVISION MAGO POINTE LOT # 55 System Installer: THOWAND PLUMBING Registration #\_\_\_\_\_ Garage Number of Bedrooms 4 Basement with plumbing: Type of Water Supply: 

Community Public Well Distance from well 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. \* CLAUITY TO D-BOX EQUAL DISTRIBUTION 718 41.2' DIN 35.4 PERMIT CONDITIONS: System shall perform in accordance with Rule . 1961. Performance: MAIDLS 11. Monitoring: As required by Rule .1961. LANE III. As required by Rule .1961. Other: \_ Maintenance: Subsurface system operator required? Yes 
No 
No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: Other: □ Pump □ Alarm □ H20Line □ D-Box **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. Type of system: 

Conventional Septic Tank: 1000 gallons Pump Tank: \_ & Other EZ FLOW III6 Subsurface No. of exact length width of depth of ditches 18-24 inches Drainage Field ditches of each ditch \_\_\_\_ feet ditches French Drain Required: Linear feet

Authorized State Agent

Date