HTE# 5 = >1905-6066

Harnett County Department of Public Health

25471

PERMIT # Operation Permit

New Installation Septic Tank Notification Line Repair Expansion

| | | | i wal Springs Low. (Lhuy | |
|--|--|---|-------------------------------------|---|
| Name: (owner) | GI HOMES NE LL | | | |
| , , | Quality septic | Registration # | | |
| Basement with plumbing | | | | |
| Type of Water Supply: | | | | |
| System Type: | | | | |
| | | | | |
| 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: | 25 HO 24 C 33 10 H II | 362 362 1H1 362 000 000 000 000 000 000 000 000 000 0 | * SERIAL DISTRIBUTE CHANGER STSTERM | |
| I. Performance: | System shall perform in accordance with Rule .1961. | | | |
| II. Monitoring: III. Maintenance: | As required by Rule .1961. As required by Rule .1961. Other: | | | |
| The state of the s | Subsurface system operator required? Yes 🗆 No 🗹 | 700 | | |
| IV. Operation: | If yes, see attached sheet for additional operation condit | ions, maintenance and reporting. | | |
| V. Other: | | | | |
| | D-Box 🗆 Pump 🗆 | Alarm □ | H20Line 🗆 | PWR Line |
| Following are the speci | cations for the sewage disposal system on the above cap | otioned property. | | |
| Type of system: | onventional 🛮 Other 🔍 🔾 Chambe | Septic Tank: 10 | gallons Pump Tank: | gallons |
| Subsurface | No. of exact length ditches of each ditch 2 | width of ditches | depth of ditches 18-26 | inches |
| Drainage Field French Drain Required: | ditches of each ditch | eet diffiles | leer diffiles | _ 1111111111111111111111111111111111111 |
| | | | | |
| Authorized State Agent Date Og 16 2019 | | | | |