HTE#\_ 5F51905-0070

## Harnett County Department of Public Health

25933

PERMIT # NA

Operation Permit

|  | <u>operation remite</u>  |       |
|--|--|-------|
|  | 🛮 New Installation 🛭 Septic Tank 🔟 Nitrification Line 🗆 Repair 🗆 Expar   | ision |
| 100 March 100 Ma | PROPERTY LOCATION: 207 Southern PI. (Clark as snil   | 28    |
| Name: (owner) Lamco woton Bldo   | SUBDIVISION Curin Plantation LOT # 30  |       |
| System Installer: Elvis Faircloth  | Registration #   |       |
| Basement with plumbing:  Garage Mumber of Bedro  | oms U  |       |
| Type of Water Supply:   Community Public W   | /ell Distance from well NA feet  |       |
| System Type: 25% reduction 35.   | 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.  |       |
|  | 100 AV AN  |       |
| This system has been installed in compliance with applicable North Carolina Gener  | al Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. |       |
|  | lc'  |       |
|  |  |       |
|  | * SENAL DISTRIBUTION   |       |
|  | CHAMBER  |       |
|  | - CONNECTED AT HEADER  |       |
| 1  | AND FOOTER OF  |       |
| 1  |  |       |
| 10   | DARINGS  |       |
|  | M 100 DECK PRESENT   |       |
|  | AT INSTALL   |       |
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|  |  |       |
| PERMIT CONDITIONS:   | b)   |       |
| I. Performance: System shall perform in accordance with R  |  |       |
| II. Monitoring: As required by Rule .1961.   |  |       |
| II. Maintenance: As required by Rule .1961. Other:   | E  |       |
| Subsurface system operator required? Yes   |  |       |
|  | eration conditions, maintenance and reporting.   |       |
| V. Operation:  |  |       |
| . Other:   |  |       |
|  |  |       |
|  | D  | Line  |
| ollowing are the specifications for the sewage disposal system on  | the above captioned property.  |       |
| ype of system:  Conventional  Other  | Septic Tank: 1000 gallons Pump Tank: gallo   | ıns   |
| ubsurface No. of exact le  | ength width of depth of  |       |
|  | ditch $3\infty$ feet ditches $3$ feet ditches $2+$ inches  |       |
| rench Drain Required: Linear feet  |  |       |
|  | 112 114  |       |
| Authorized State Agent   | Date 12/06/2019  |       |
|  |  |       |