HTE#_	55	71916-061	1
PERMIT	#	20	

Harnett County Department of Public Health

25979

PERMIT # \sigma \frac{\sigma}{2}		Operation	on Permit		5-1412
			on 🖾 Septic Tank 🔍	Nitrification Line	
		PROPERTY LO	OCATION: 16 Rawls	FORM 10 /Chi	ship It Amal
Name: (owner)	KB Homes Carolina	SUBDIVISIO	IN mason Pointe	SHO	LOT # 3
	Thereens Republing		ation #		
Basement with plumbi					
	Community Public	Distance from well	NA feet		
	25% Neduction 3/5 TH		ypes V and VI Systems expire in	,	
(In accordance with Ta	able V a)	Owner must contact H	lealth Department 6 months prior	to expiration for permit	renewal.
This system has been install	led in compliance with applicable North Carolina General Sta	utes, Rules for Sewage Treatm	ent and Disposal, and all conditions of	le Improvement Permit and Cons	truction Authorization.
PERMIT CONDITIONS:		22' 22' 24' 25' 25' 25' 25' 25' 25' 25' 25' 25' 25	30, 20, 20, 20, 20, 20, 20, 20, 20, 20, 2	TAWLS CHUTCH TO	
I. Performance:	System shall perform in accordance with Rule.	198PLS FAZM	LLN		
II. Monitoring:	As required by Rule .1961.				
III. Maintenance:	As required by Rule .1961. Other:	. 72			
	If yes, see attached sheet for additional operation		nce and reporting		
IV. Operation:		on conditions, manifemat	nee and reporting.		
V. Other:					
	D-BoxPump		Alarm □	U201: □	DWD I:
Following are the energy				H20Line 🗆	PWR Line
	fications for the sewage disposal system on the a Conventional & Other & &			gallons Pump Tank:	gallans
Subsurface	No. of exact length		width of	depth of	Railous
Drainage Field		th feet		feet ditches	24 inches
French Drain Required:	Linear feet				
Authorized State Age	ent		Date	02/12/20	i