HTE# SFD1911-0045

Harnett County Department of Public Health

No. 26136

Operation Permit

PERMIT # NA	Operation Permit 5 ~ 142	15
	🗆 New Installation 🗟 Septic Tank 🔁 Nitrification Line 🗆 Repair 🗆 Expa	nsion
	PROPERTY LOCATION: 169 OLD HEAD WAT (CHALBERTE)	
Name: (owner) LGT HOMES DC LLC	SUBDIVISION AVERY POWD PHITTC LOT # 8	7
System Installer: THO RATIONS PLUMBING		•
Basement with plumbing: Garage Number of Bedroom	ns <u>3</u>	
Type of Water Supply: Community Public Well		
System Type: 25% NETWOOT 10.5555 (In accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for permit renewal.	
(iii accordance with rapie v a)		
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.		
	* GRAVITY TO D-BOX EQUA	e
	DISTRIBUTION	
	* INSTALL 04/27/2020	
(o),	X TANK RELOCTED TO MEET	
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	P.L. SETSMENCS 04/20/3	
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PERMIT CONDITIONS:	NA DOMESTIC OF THE PARTY OF THE	
I. Performance: System shall perform in accordance with Ruft II. Monitoring: As required by Rule .1961.	ETYBI. HEAD WAT	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes		
• •	ration conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
	np	WR Line
Following are the specifications for the sewage disposal system on the		EIIIO
Type of system: Conventional Other Type of system:		allons
Subsurface No of avast les	noth width of donth of	2000ANANTORS
Drainage Field ditches 2 of each	ditches 3 feet ditches 18 inche	2
French Drain Required: Linear feet		
2-		
Authorized State Agent	Date 04 28 2020	