HTE# 5502002-0009

Harnett County Department of Public Health

No. 26232

Operation Permit PERMIT # _____ Sr 1429 PROPERTY LOCATION: 83 WATERVILLE WAY CCHALBERTERD Name: (owner) LGT HONES NC UC SUBDIVISION ADERY POND THE LOT # 144 System Installer: THORNTONS PWABING Registration # Garage Number of Bedrooms Basement with plumbing: Type of Water Supply:

Community Public Well Distance from well System Type: 25% POSCITION 55. IIIG 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. * ADDITIONAL DEPTH APPROVED 500 DIN PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule . 1961 II. Monitoring: As required by Rule .1961. Maintenance: As required by Rule .1961. Other: ____ Subsurface system operator required? Yes
No . If yes, see attached sheet for additional operation conditions, maintenance and reporting. 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 X Other ET FLOW ING Septic Tank: \\006 gallons Pump Tank: _____ gallons Subsurface No. of exact length width of depth of Drainage Field ditches ditches 14-24 inches of each ditch ditches ___ French Drain Required: Linear feet 06/05/2020 Authorized State Agent Date