HTE# 555 2002-0048

Harnett County Department of Public Health

No. 26534

PERMIT # _____

Operation Permit

New Installation 🗷 Septic Tank ⊄ Nitrification Line 🗆 Repair 🗀 Expansion		
PROPERTY LOCATION: 730 CHILISTIAN LIGHT 15 (SN 1412)		
Name: (owner) WEAVER HOMES INC.	SUBDIVISION FULTE FARM LOT # 8	
System Installer: YELLOW DOG GRAD	Registration #	
Basement with plumbing: Garage Mumber of Bedrooms	4	
Type of Water Supply: Community Public Well	Distance from well feet	
System Type: 25% NESSOCTIONS &	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.		
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PERMIT CONDITIONS:	$-\omega$	
I. Performance: System shall perform in accordance with Rule .	1961.	
II. Monitoring: As required by Rule 1961	1	
III. Maintenance: As required by Rule . 1961. Other: Citiz 157	MANLY 20 (SA1413)	
Subsurface system operator required? Yes 🗆 N	0 🗆	
If yes, see attached sheet for additional operati	on conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
□ D-Box □ Pump	□Alarm □ H20Line □ PWR Line	
Following are the specifications for the sewage disposal system on the		
Type of system: Conventional Other Other	AMBER TITE Septic Tank: Loos gallons Pump Tank: gallons	
Subsurface No. of exact length		
,	th 300 feet ditches 3 feet ditches 24 inches	
French Drain Required: Linear_feet	incres incres incres	
Authorized State Agent	Date 08/10/2020	
The state of the s	Date	