HTE# 5502003-0035

Harnett County Department of Public Health

No. 26524

PERMIT # NA

Operation Permit

	ST Was
	🗷 New Installation 左 Septic Tank 🖂 Nitrification Line 🗆 Repair 🗀 Expansion
	PROPERTY LOCATION: 837 AVERY POIND DR. (CHALBESTE A
Name: (owner) _ LGI +10 NES ~ LLC	SUBDIVISION AVERY POND LOT # 134
System Installer: THORNTONS Prom	Brack Registration #
Basement with plumbing: ☐ Garage ☑ Number of Bedroon	
Type of Water Supply: Community Public We	
System Type: 25% NESOCOTO S	
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for permit renewal.
27	owner must contact reach bepartment o notices 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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	30, 010
PERMIT CONDITIONS:	
I. Performance: System shall perform in accordance with Rul	1961
III. Maintenance: As required by Rule .1961. Other:	AUERY POND OR.
Subsurface system operator required? Yes	No 🕅
	ration conditions, maintenance and reporting.
IV. Operation:	ation conditions, maintenance and reporting.
V. Other:	
□ D-Box □ Pum	
Following are the specifications for the sewage disposal system on the	
Type of system: Conventional Other EZ	
Subsurface No. of exact lea	gth width of depth of
	ditch 60 feet ditches 3 feet ditches 24 inches
French Drain Required: Linear feet	
	- /
Authorized State Agent	Date 07/30/2020
state agent C	Date Date