HTE# 1502005-0052

Harnett County Department of Public Health

No. 26704

PERMIT # ____A

Operation Permit

New Installation 🕾 Septic Tank 😡 Nitrification Line 🗆 Repair 🗆 Expansion	
Name: (award) 11-26 11 6-201 75 8-6-74 (SOLIDANIS)	
Name: (owner) HOGH SOLLES BLOS CLC SUBDIVISION PLACE POINTE LOT # a System Installer: COLY GILOZOT Registration #	
Basement with plumbing: Garage Number of Bedrooms 4	
Type of Water Supply: Community Public Well Distance from well Feet	
System Type: 25% NESDICTION STS. TITLY 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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25% NED	
PERMIT CONDITIONS:	
PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule . 1961.	
II. Monitoring: As required by Rule .1961.	
III. Maintenance: As required by Rule .1961. Other:	
If yes, see attached sheet for additional operation conditions, maintenance and	reporting
IV. Operation:	- Teporang.
V. Other:	
□ D-Box □ Pump □ Ala	rm 🗆 H20Line 🗆 PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.	
Type of system: Conventional Other GH CHAMBEN TILG Subsurface No. of exact length	Septic Tank: 1250 gallons Pump Tank: gallons
Subsurface No. of exact length Drainage Field ditches feet	width of depth of ditches 3 feet ditches 24 inches
French Drain Required: Linear feet	ditches feet ditches inches
Authorized State Agent Date 10 14 2020	