HTE# 5F > 2005-005C

Harnett County Department of Public Health

No. 26685

PERMIT # ~

Operation Permit

1 EMIN 17		operation rei	HIIL	3~ 1429
		New Installation	Septic Tank Nitrificat	ion Line 🗆 Repair 🗖 Expansion
				M. (CHABELTE ND)
Name: (owner)	LGI HOMES NE U	CHRDIVICION	0 = - 5 0	10T # /2:
System Installer:	Tire	Designation #	HOEST LOW	LUI # _*&/
Pasamant with alumb	THONTONS PLUMB:	Kegistration #		
Basement with plumb				
	: Community R Public Well			
(In accordance with 1		- /1	d VI Systems expire in 5 years.	sian for a series and a series
(in accordance with i	able (a)	Owner-must contact nearth Depa	artment 6 months prior to expira	tion for permit renewal.
This system has been insta	lled in compliance with applicable North Carolina General St	atutes, Rules for Sewage Treatment and Disp	osal, and all condition of the Improvement	ent Permit and Construction Authorization
PERMIT CONDITIONS: I. Performance:	System shall perform in accordance with Bule	25 (2) (2) (2) (2) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4		VITY TO D-BOX
I. Performance:II. Monitoring:	A		7	
III. Maintenance:	As required by Rule .1961. Other.	AHINCH DA.		
	Subsurface system operator required? Yes 🗆 1	io 🔀		
	If yes, see attached sheet for additional operation		porting.	
IV. Operation:				
V. Other:				
	D-Box D Pump			
		Alarm	□ H20	DLine 🗆 PWR Line
	fications for the sewage disposal system on the		and the same	
Type of system: Subsurface	No of avast langu			ons Pump Tank: gallons
Drainage Field	No. of exact length of each dit		width of ditches 3 feet	depth of ditches 24 inches
French Drain Required:		LII Teet	ditches feet	ditches 24 inches
Diam nequireu.	Linear leet			
Authorized State Ag	ent Manual	mm per	Date	9/24/2020