HTE# SFD 2005-0079

Harnett County Department of Public Health

No. 26716

PERMIT # _____

Operation Permit

New Installa	tion ⁄ Septic Tank 🔯 Nitrification Line 🗌 Repair 🗌 Expansion
PROPERTY	LOCATION: 88 FLORENCE PINES CT. [CAKRING DU.
	SION FLONENCE PINES LOT # 4
	tration #
Basement with plumbing: Garage Number of Bedrooms	
	NA feet
System Type: 25% NEDICTION STS. ITTIG	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 Trea	tment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
N DO UNSSTABLE	* GRAUTT TO D-BOX
	501 EGVAL DISTAIR STEEN
TABLE -	24' * SOTUTUTE (DATE /2)
() () () () () () () () () ()	* OTILITIES (WATER/ROWERS
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, 10	1514 950 II'
1 1	
10	AND A LATER II'
Strate of C. D.	AMER
875	22
534	70 50/6
	DUMP TO 50%
To the second of	
12 1 223	
66062	
Z NEGOLIA	
144'	
1 2	
PERMIT CONDITIONS:	PINES
I. Performance: System shall perform in accordance with Rule .1961.	
II. Monitoring: As required by Rule .1961.	: <u>&</u>
III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes \(\subseteq \text{No.} \square \)	
If yes, see attached sheet for additional operation conditions, mainten IV. Operation:	nance and reporting.
The Operation.	
V. Other:	
□ D-Box □ Pump □	Alarm □ H20Line □ PWR Line
Following are the specifications for the sewage disposal system on the above captioned prope	0.0000000000000000000000000000000000000
Type of system: Conventional Other EZ Conventional	
Subsurface No. of exact length	width of depth of
Drainage Field ditches of each ditch fe	
French Drain Required: Linear feet	
Authorized State Agent	Date 10 22 2020