HTE# 5702006-0067

## Harnett County Department of Public Health

PERMIT # \_\_\_\_\_

Operation Permit

No. 26730	N	0.	2	6	7	3	0	
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PERMIT #	<u>operation rermit</u> 5~ 1429
	🗵 New Installation 🗵 Septic Tank 🗷 Nitrification Line 🗆 Repair 🗆 Expansion
	PROPERTY LOCATION: GO I AVENT POND DR. CCHALBELTE (D)
Name: (owner) LGT HOMES WE (16	SUBDIVISION AURAL POND PHI THE LOT # 111
System Installer: QUILITY SECTIL	
Basement with plumbing: Garage Mumber of Bedrooms	
Type of Water Supply:  Community Public Well	Distance from well feet
System Type: 25% VEXXXIVES 575 (In accordance with Table V a)	
(iii 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 New Courties Court Sec	D.L. C. C. T
1773 System has been histailed in compilance with applicable North Carolina General Stat	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
* DISTALL: 10/23/2020	
	* PUMP TO MEDIUM D. 200
1	W/ EGUAL DISTRIBUTION
	EZ = (10)
/13'	2450
/ ;	10'
	2670 120
1 1	LEONIA DE
	A NZA F
/ 2/1	- 163+ - [i]
-20'	
	SFD
	35-79
	10 27
	P 27'
	9/20 761
	70 36'
PERMIT CONDITIONS	
I. Performance: System shall perform in accordance with Rule .	961 Orive
II. Monitoring: As required by Rule .1961.	701.
III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes \(\sigma\) No	
If yes, see attached sheet for additional operation	on conditions, maintenance and reporting
IV. Operation:	on constitution, maintenance and reporting.
V. Other:	
	The state of the s
	□ Alarm □ H20Line □ PWR Line
Following are the specifications for the sewage disposal system on the a	
Type of system:  Conventional Other Et Florence Conventional	
Subsurface No. of exact length	
	h 60 feet ditches 3 feet ditches 24 inches
French Drain Required: Linear feet	
Authorized State Agent 2 Manh	Date Do- 20 - 25