HTE# 5FD 2007-0064

Authorized State Agent\_\_\_

## Harnett County Department of Public Health

No. 26690

10/01/2020

Date

**Operation Permit** PERMIT # \_\_\_ NA 3~1446 New Installation 🗷 Septic Tank 🖳 Nitrification Line 🗆 Repair 🗆 Expansion PROPERTY LOCATION: 215 NOTALS FORM DR (JAMES NEVERS) Name: (owner) True Flores LL SUBDIVISION NOW TAKE LOT # 11 System Installer: DAVIS GRANTEY + SCALE Registration # Basement with plumbing: Garage Number of Bedrooms Type of Water Supply: 

Community Public Well Distance from well feet System Type: 25% 12000000 5.5. Illy 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. PERMITTED 115(2) PERMIT CONDITIONS: System shall perform in accordance with Rule . 1961. 1. Performance: 11. As required by Rule .1961. Monitoring: III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes \( \subseteq \text{No } \( \subseteq \text{ }'\) If yes, see attached sheet for additional operation conditions, maintenance and reporting. Operation: Other: □\_\_\_\_\_\_ Pump □\_\_\_\_\_\_ Alarm □ \_\_\_\_\_\_ H20Line □ \_\_\_\_\_\_ PWR Line D-Box Following are the specifications for the sewage disposal system on the above captioned property. Type of system: 

Conventional Other ES FLOW III 9 \_\_\_ Septic Tank: \_\_\_\_\_ gallons Pump Tank: \_ Subsurface No. of exact length width of depth of Drainage Field ditches of each ditch ditches ditches French Drain Required: Linear feet