## Harnett County Department of Public Health

PERMIT # SFD 2010 - 0068 R

Operation Permit

Mew Installation 🛣 Septic Tank 🔼 Nitr	fication Line  Repair Expansion
Name: (owner) Adams Homes SUBDIVISION Carolina Seasons	I way (SR 1394)
	LOT # <u>9</u>
System Installer: Yellow Dog  Basement with plumbing:  Garage M Number of Bedrooms 3	
Type of Water Supply:   Community   Public   Well Distance from well feet	
System Type: Types V and VI Systems expire in 5 yes	
(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 Imp	provement Permit and Construction Authorization.
System Inst	ZUND 01 7-24-23
~ 150°	
152 421 / 321 43 / 421 / 431 /	
PERMIT CONDITIONS:  I. 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:	
V. Other:	
D-Box Denote the proof of the p	H20Line               PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.  Type of system:  Conventional Other 25 Tordoction Page Septic Tank: 1000	gallons Pump Tank: gallons
Subsurface No. of exact length width of	depth of
Drainage Field ditches of each ditch feet ditches Linear feet	feet ditches 24 inches
, 1	8-30-23