

Harnett County Department of Public Health

PERMIT # SFD2107-0017

Operation Permit

51436

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: 64 WALKER GROVE LN. (MATTHEWS RD.)

Name: (owner) TRUE HOMES LLC SUBDIVISION _____ LOT # _____

System Installer: DAVID GRANTLEY & SONS

Basement with plumbing: Garage Number of Bedrooms 4

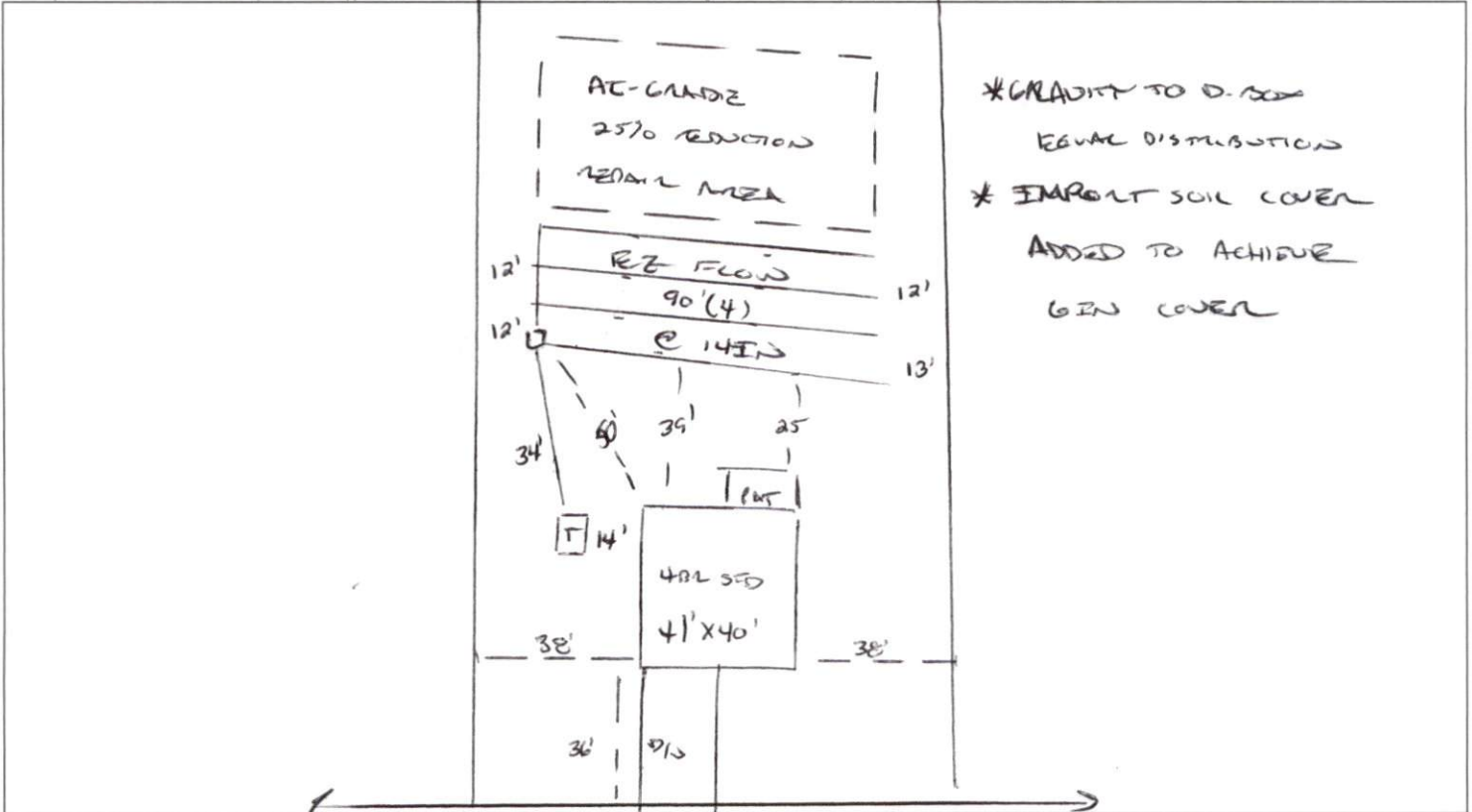
Type of Water Supply: Community Public Well Distance from well NA feet

System Type: 25% REDUCTION SYSTEM IIIg 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.



* GRAVITY TO D. BOX
EQUAL DISTRIBUTION
* IMPROV. SOIL COVER
ADDED TO ACHIEVE
GEM COVER

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: _____
Subsurface system operator required? Yes No
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

_____ D-Box _____ Pump _____ Alarm _____ H2O Line _____ PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other EZ FLOW IIIg Septic Tank: 1000 gallons Pump Tank: _____ gallons
Subsurface No. of exact length width of depth of
Drainage Field ditches 4 of each ditch 90 feet ditches 3 feet ditches 14 inches
French Drain Required: _____ Linear feet

Authorized State Agent [Signature] Date 09/07/2021