## Harnett County Department of Public Health

**Operation Permit** PERMIT # SFD2110-0120 521769 New Installation Septic Tank Nitrification Line Repair Expansion PROPERTY LOCATION: 14 HAWKS CROST CT. (OLD STAGE RD 5.) Name: (owner) SIGNATURE HOME BLDS LOT # MILDWOOD SUBDIVISION CONT GILBERT Basement with plumbing: Garage Number of Bedrooms Type of Water Supply: 

Community Public Well Distance from well Types V and VI Systems expire in 5 years. System Type: 25% 1200CTION 83. TILLS Owner must contact Health Department 6 months prior to expiration for permit renewal. (In accordance with Table V a) 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. EXT 130'(2) REPA.A 717-IP \* PUMP TO MEDIUM D-BOX P ELUAL DISTRIBUTION DIW 361 03/22/2022 1P+ALARM 05/03/2022 PERMIT CONDITIONS: System shall perform in accordance with Rule . 1961. ١. Performance: As required by Rule .1961. II. Monitoring: HAWKS CROST As required by Rule .1961. Other. III. Maintenance: Subsurface system operator required? Yes  $\square$  No  $\square$ If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: Other: D-Box **H20Line** Pump Alarm Following are the specifications for the sewage disposal system on the above captioned property. gallons Pump Tank: 1000 EZ FLOW THE Type of system: 

Conventional Other 2 Septic Tank: Subsurface width of depth of No. of exact length 130 feet ditches of each ditch ditches ditches 18-20 inches Drainage Field French Drain Required: 05/03/2022 Date Authorized State Agent