Harnett County Department of Public Health

PERMIT # 5FD 2112 - 0055

Operation Permit

| New Installation | ion |
|---|--------|
| Name: (owner) Regency Homes PROPERTY LOCATION: 4/2 Josey Williams Rd (SR 2027) SUBDIVISION North form LOT # 1 | _ |
| Name: (owner) Regency Homes SUBDIVISION North fam LOT # 1 System Installer: Frankis Jones | _ |
| System Installer: frankis Jones | |
| Basement with plumbing: Garage Mumber of Bedrooms 3 | |
| Type of Water Supply: Community Public Well Distance from well feet | |
| System Type: Types V and VI Systems expire in 5 years. (In accordance with Table V a) | |
| (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. | |
| FUTURE PRINCE Area | |
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| PERMIT CONDITIONS: | |
| 1. 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 \(\sum \) No \(\sum \) If yes, see attached sheet for additional operation conditions, maintenance and reporting. | |
| If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: | |
| ii. Operation. | |
| V. Other: | |
| D-Box Pump > Alarm H20Line PW | R Line |
| Following are the specifications for the sewage disposal system on the above captioned property. | |
| Type of system: Conventional Conventional Other 25% Coduction I Q Septic Tank: 1000 gallons Pump Tank: 1000 gal | lons |
| Subsurface No. of exact length width of depth of | |
| Drainage Field ditches of each ditch feet ditches feet ditches inches | |
| French Drain Required: Linear feet | |
| | |
| Authorized State Agent / Ch REHS Date 2-27-23 | |
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