Harnett County Department of Public Health

PERMIT # 5 D 2 2 0 6 -00 60

Operation Permit

	New Installation 🗵 Septic Tank 🔽 Nitrification Line 🗆 Rep	pair 🗆 Expansion
Now (TET 2 11	PROPERTY LOCATION: 195 Rocking Caral Pl (01 4015)
Name: (owner)	SUBDIVISION williams form	LOT # <u>14</u>
System Installer: Garage Septic Basement with plumbing: Garage Number of Bedrooms	4	
Type of Water Supply: Community Monitor of Bedrooms Type of Water Supply: Community Monitor of Bedrooms	Distance from well feet	
System Type: Type III G	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 renew	val.
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.		
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Pump Pump To To		
[37'x52 / W / /		
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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:	An	
Subsurface system operator required? Yes If yes, see attached sheet for additional opera		
IV. Operation:	tion conditions, maintenance and reporting.	
V. Other:		
D-Box		PWR Line
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other 25% reduction General Septic Tank: 1000 gallons Pump Tank:		
Subsurface No. of exact leng	th width of depth of	gallons
Drainage Field ditches of each di		29 inches
French Drain Required: Linear feet		
u l o	01- 05-	
Authorized State Agent Mark W REHS Date 12-21-22		