## Harnett County Department of Public Health

PERMIT # 500	Operation Permit	
	New Installation Septic Tank Mitrification Line Repair	Expansion
	PROPERTY LOCATION: SN1412 Christian Cost RD	
Name: (owner)	Taiple A Homes Fax SUBDIVISION Private Place LOT #	23
System Installer: _	ADCOCK Exercistion	
Basement with plumbi		
Type of Water Supply:		
System Type:		
(In accordance with Ta	able V a) Owner must contact Health Department 6 months prior to expiration for permit renewal.	
This system has been instal	led in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authoriza	ition.
This system has been histar		
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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:	
	Subsurface system operator required? Yes □ No □	
W 0	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
	D-Box   Pump   Alarm   H20Line	PWR Line
Following are the spe	ecifications for the sewage disposal system on the above captioned property.	
Type of system:	Conventional Other 25% 10300 CTUDN Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface	No. of exact length width of depth of ditches 4 of each ditch 90 feet ditches 3 feet ditches 20	inches
Drainage Field French Drain Require	d: Linear feet	iliciles
Authorized State	) M. 1 R NoHS	