

Harnett County Department of Public Health

PERMIT # SFD 2302-0064

Operation Permit

193 Indigo

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: NEILLS CAGAN RD

Name: (owner) SIGNATURE HOME SUBDIVISION SOUTH CAGAN LOT # 86

System Installer: CORY GILBERT

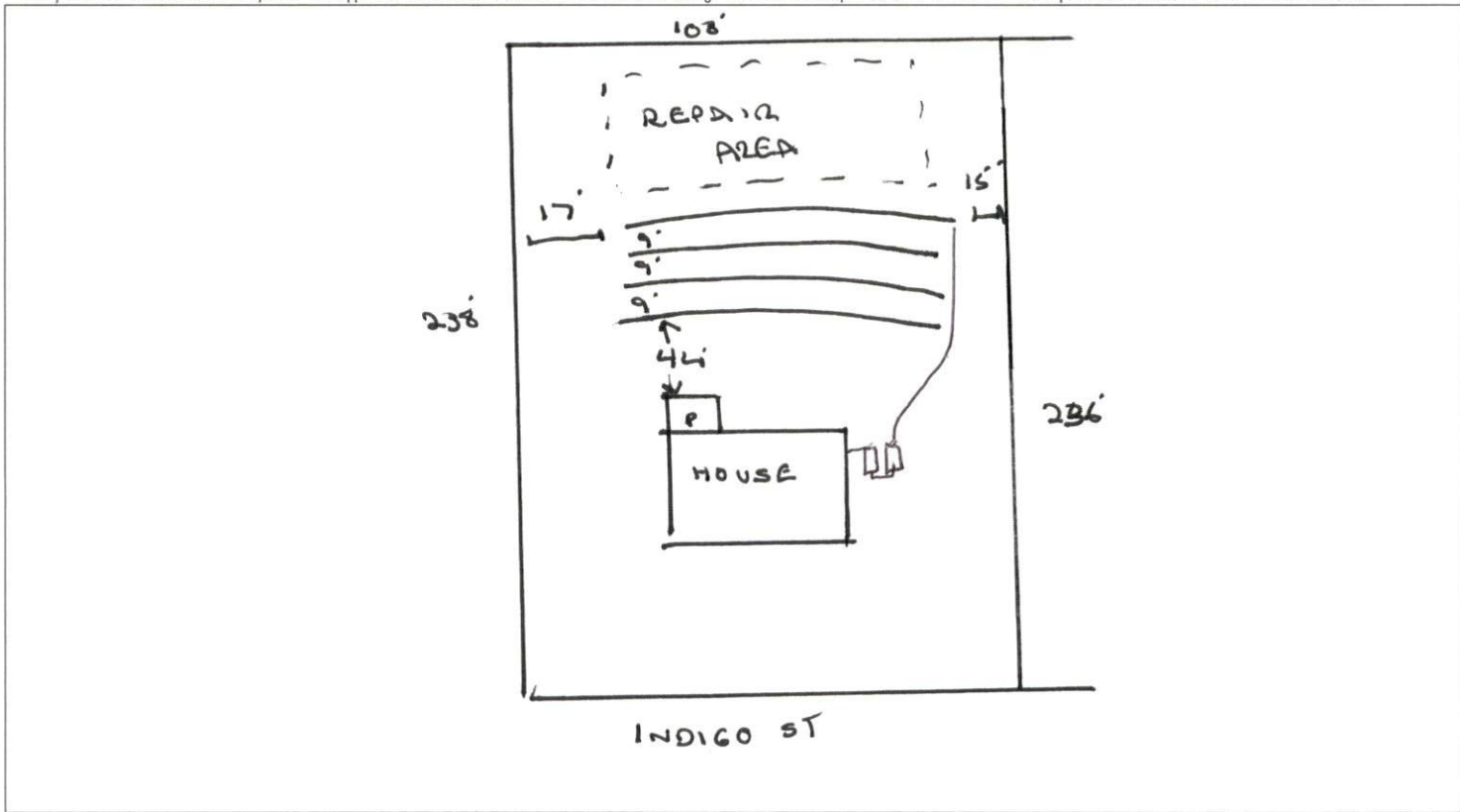
Basement with plumbing: Garage Number of Bedrooms 3

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

System Type: 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.



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 E2 FLOW Septic Tank: 1000 gallons Pump Tank: 1000 gallons

Subsurface No. of exact length width of depth of
Drainage Field ditches 4 of each ditch 75 feet ditches 3 feet ditches 22-18 inches

French Drain Required: _____ Linear feet

Authorized State Agent Mohd RENS Date 7-7-23 / Pump Final