## Harnett County Department of Public Health

|                                   |  | ,                                  |                            |   |                                 |             |
|-----------------------------------|--|------------------------------------|----------------------------|---|---------------------------------|-------------|
| PERMIT #5FD                       | 2326-041   | <b>Operation</b>                   | Permit                     | /   |                                 |             |
|                                   | ,  |                                    |                            | Nitrification I                             | ine 🗆 Repair 🗆                  | Expansion   |
|                                   |  | PROPERTY LOCA                      | TION \$7 1412              | Christian ligh                              | # PA                            | LAPAIISIOII |
| Name: (owner)                     | Davidson Homes   | SUBDIVISION                        | Paire Pi                   | nee   | LOT #                           | UR          |
|                                   | austaty Septic   | 300011131011                       | I MACE I                   | ITEL  |                                 | 70          |
| Basement with plumbi              |  | 4                                  |                            |   |                                 |             |
| Type of Water Supply:             |  | Distance from well                 | feet                       |   |                                 |             |
|                                   | & TUSKUCTUN System Type                                      | Type                               | es V and VI Systems e      | xpire in 5 years.                           |                                 |             |
| (In accordance with T             |  | Owner must contact Heal<br>EZHow   | th Department 6 mon        | ths prior to expiration f                   | or permit renewal.              |             |
| This system has been instal       | lled in compliance with applicable North Carolina General St | atutes, Rules for Sewage Treatment | and Disposal, and all cond | itions of the Improvement Peri              | mit and Construction Authorizat | ion.        |
|                                   |  | Much Pi                            | South A                    | War And | CASHE Pord WAY                  |             |
| PERMIT CONDITIONS:                |  |                                    |                            |   |                                 |             |
| I. Performance:                   | System shall perform in accordance with Rule                 | .1961.                             |                            |   |                                 |             |
| II. Monitoring: III. Maintenance: | As required by Rule .1961. As required by Rule .1961. Other: |                                    |                            |   |                                 |             |
| Hamtenance.                       | Subsurface system operator required? Yes                     | No 🗆                               |                            |   |                                 |             |
|                                   | If yes, see attached sheet for additional opera              |                                    | and reporting.             |   |                                 |             |
| IV. Operation:                    |  | 50                                 | . •                        |   |                                 |             |
| V. Other:                         |  |                                    |                            |   |                                 |             |
|                                   | D-Box 🗆 Pump   | p 🗆                                | Alarm 🗆                    | H20Line                                     |                                 | PWR Line    |
|                                   | cifications for the sewage disposal system on the            |                                    |                            |   |                                 |             |
| Type of system:                   |  |                                    |                            | 1000 gallons                                | Pump Tank:                      | gallons     |
| Subsurface<br>Drainage Field      | No. of exact leng  | 12 0 0                             | width of                   | 7   | depth of                        |             |
| French Drain Required             |  | litch 390 feet                     | ditches                    | 5 feet                                      | ditches 20-> 18                 | _ inches    |
| Prain nequired                    | Linear leet  | 1 . /                              |                            |   |                                 |             |
| Authorized State A                | gent jones [ 1   | Vanhant                            | ATTENS                     | Date  | 5-23                            |             |