## Harnett County Department of Public Health

PERMIT # SPD 2309-0045 **Operation Permit** New Installation Septic Tank Mitrification Line Repair Expansion PROPERTY LOCATION: 1/8 Oleander (n CSR1229) Weaver Homes SUBDIVISION West Preservs LOT # 37 Name: (owner) System Installer: Garage Number of Bedrooms 3 (6000) Basement with plumbing: Type of Water Supply: 

Community Public Well Distance from well System Type: \_\_\_\_ 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. Oleander PERMIT CONDITIONS: System shall perform in accordance with Rule .1961. Performance: II. As required by Rule .1961. Monitoring: III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes 
No 
No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: Other: D-Box Pump Alarm H20Line **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: 

Conventional Conven Subsurface No. of exact length of each ditch 226 feet ditches Drainage Field ditches French Drain Required: Linear feet 5-24-24 Authorized State Agent