Harnett County Department of Public Health

**Operation Permit** PERMIT # 8502402008/ New Installation Septic Tank Nitrification Line 
Repair Expansion PROPERTY LOCATION: 191 ROBGES HONE Name: (owner) KB HOME ROLE, CH SUBDIVISION BIQUINDOD GOOVE System Installer: BRANTLEY Basement with plumbing: Garage Number of Bedrooms Type of Water Supply: 

Community Public 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. 23) HOUSE ROSER HOWE PERMIT CONDITIONS: Performance: System shall perform in accordance with Rule . 1961. 11. As required by Rule .1961. Monitoring: 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: 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 Other Pump To CHAMBED COL Septic Tank: 1000 gallons gallons Pump Tank: 1000 Subsurface No. of exact length width of of each ditch 345 ditches 24 Drainage Field ditches ditches inches French Drain Required Linear feet Authorized State Agent