

## Harnett County Department of Public Health

PERMIT # SFD 2406-0071

## Operation Permit

228 Hillwood Dr

☒ New Installation    ☒ Septic Tank    ☒ Nitrification Line    ☐ Repair    ☐ Expansion

PROPERTY LOCATION: 32 Alpine Dr

Name: (owner) Southern Touch Homes SUBDIVISION West Pointe LOT # 41

System Installer: SS Specialist

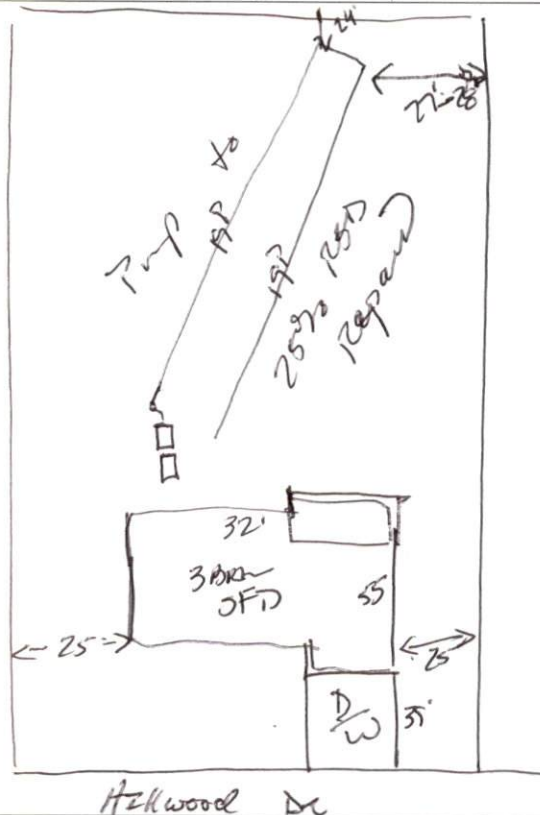
Basement with plumbing: ☐ Garage ☒ Number of Bedrooms 3

Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well \_\_\_\_\_ feet

System Type: Temp to 25% Reduction 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.



\* NEEDS Pump + Alarm

## 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: _____<br>Subsurface system operator required? Yes <input type="checkbox"/> No <input type="checkbox"/><br>If yes, see attached sheet for additional operation conditions, maintenance and reporting. |
| IV.  | Operation:   | _____                                                                                                                                                                                                                                  |
| V.   | Other:       | _____                                                                                                                                                                                                                                  |

☐ \_\_\_\_\_ D-Box ☒ \_\_\_\_\_ Pump ☒ \_\_\_\_\_ Alarm ☐ \_\_\_\_\_ H2OLine ☐ \_\_\_\_\_ PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: ☐ Conventional ☒ Other 75% TUDOR Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons  
Subsurface No. of \_\_\_\_\_ exact length \_\_\_\_\_ width of \_\_\_\_\_ depth of \_\_\_\_\_  
Drainage Field ditches 1 of each ditch 156 feet ditches 3 feet ditches 24-30 inches

French Drain Required: \_\_\_\_\_ Linear feet

Authorized State Agent

Mohd RUSHS

Date 9-30-25