## Harnett County Department of Public Health

Operation Permit PERMIT # 590 2410-0016 New Installation Septic Tank Mitrification Line Repair Expansion PROPERTY LOCATION: SX /162 Should Workson PD Homes SUBDIVISION WASSON Tid System Installer: Basement with plumbing: Garage Number of Bedrooms Type of Water Supply: 

Community Public Distance from well System Type: 75% Rebuter on System Change Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewal. (In accordance with Table V a) 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. 10 Rocking House PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule . 1961. II. 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: ٧. Other: D-Box Pump Alarm **H20Line PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. 1000 Type of system: 

Conventional 1 Other 25% PEDUCTUND Systis Septic Tank: gallons Pump Tank: Subsurface exact length width of depth of ditches 200 Drainage Field of each ditch ditches ditches French Drain Required: Linear feet Authorized State Agent Date