Harnett County Department of Public Health

PERMIT # 3FV 2303-018.	<u>Operation Permit</u>	
	Mew Installation Septic Tank Mitrification Line	☐ Repair ☐ Expansion
	PROPERTY LOCATION: 90 Cnltivator ct,	Angie
Name: (owner) Deviden Homes	PROPERTY LOCATION: 90 Cultivator ct, SUBDIVISION Tobacco Road	LOT # 100
System Installer: Genes Dackhoe		
Basement with plumbing: Garage G Number of Bedro	oms 4	
Type of Water Supply:   Community   Public   W		
System Type: 25% Reduction Type III(9) &	Z-Flow 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 p	permit renewal.
	1	
This system has been installed in compliance with applicable North Carolina Gener	ral Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit a	nd Construction Authorization.
* Needs LSS Revision For	Final	
- Gravity system		
01201/7 1/2/25		
	111	
	A ST.	
1 42		
1 1 65 /	242' 76'	
85'	// 4	
1100		
	4.81	
110	95 75' - 6 0/W \$	
W. W.	1 14 1 8°	
	14.8% 6 0/W 32 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
1,0	7 7 7	
1/4		
	1	
PERMIT CONDITIONS:		
Performance: System shall perform in accordance with 1	1061	
II. Monitoring: As required by Rule .1961.	MIE .1701.	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes		
	operation conditions, maintenance and reporting.	
IV. Operation:	personal conditions, maintenance and reporting.	
V. Other:		
D.D		
	ump 🗆 Alarm 🗆 H20Line	PWR Lin
Following are the specifications for the sewage disposal system on	the above captioned property.	
Type of system:  Conventional Other Type TH		
	114	oth of 2/3/ inches
	ch ditch feet ditches feet ditch	ches inches
French Drain Required: Linear feet		
Authorized State Agent	Date	