

HTE# _____

Harnett County Department of Public Health

No. 26577

PERMIT # SFD 2306-29

Operation Permit

☒ New Installation ☒ Septic Tank ☒ Nitrification Line ☐ Repair ☐ ExpansionPROPERTY LOCATION: 1850 Shady Grove Rd (SR 2050)Name: (owner) Signature Home Builders

SUBDIVISION _____

LOT # _____

System Installer: C. Gilbert

Registration # _____

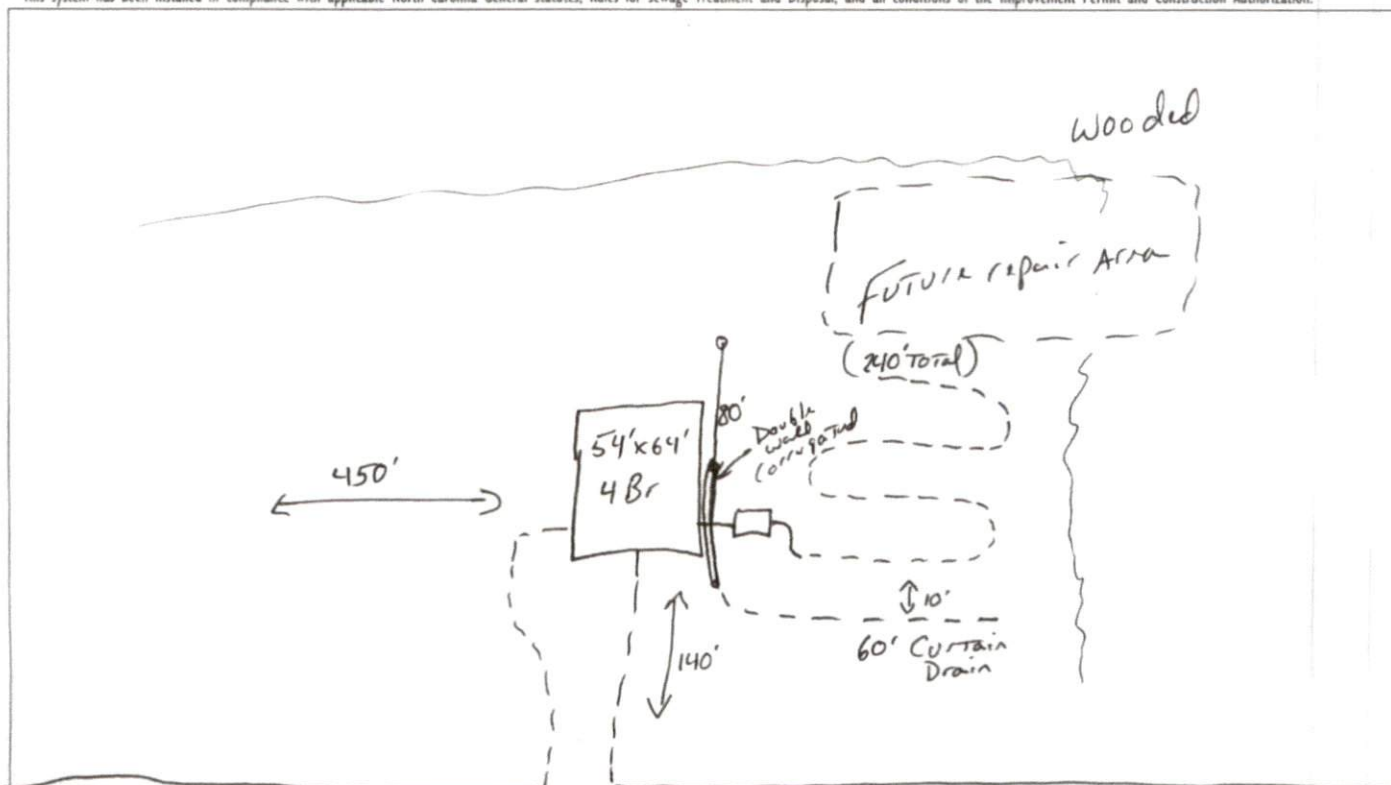
Basement with plumbing: ☐ Garage ☒ Number of Bedrooms 4 (8 people)Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well _____ feetSystem Type: TYPE III 9

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.



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: _____
- Subsurface system operator required? Yes ☐ No ☒
- If yes, see attached sheet for additional operation conditions, maintenance and reporting.

IV. Operation: _____

V. Other: _____

☐ D-Box ☐ Pump ☐ Alarm ☐ H2O Line ☐ PWR Line

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

Type of system: ☐ Conventional ☒ Other 25% reduction E2Flow Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface No. of exact length width of depth of
 Drainage Field ditches 1 of each ditch 240 feet ditches 3 feet ditches 24 inches

French Drain Required: _____ Linear feet

Authorized State Agent

Meh A. REHSDate 12-14-23