Harnett County Department of Public Health

PERMIT # SFD 2504-0091

Operation Permit

| | New Installation Septic Tank Nitrification Line PROPERTY LOCATION: 147 M. Idas Pl () Homes SUBDIVISION Hornigton Place of Redrooms 4 (8 People) | Repair Expansion |
|---|--|-----------------------------|
| " (| PROPERTY LOCATION: 145 M. 14 97 () | 1279) |
| Name: (owner) | Tomes SUBDIVISION HORINGTON Flack | LOT # |
| System Installer: A+R | 1/6/1 | |
| Basement with plumbing: Garage Number Type of Water Supply: Community Public | of Bedrooms 4(8) Copies | |
| Type of Water Supply: Community M Public | Well Distance from well | |
| System Type: 1 Ype 711 | lypes 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 per | mit renewal. |
| This system has been installed in compliance with applicable North Card | olina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and | Construction Authorization. |
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| PERMIT CONDITIONS: | | |
| I. Performance: System shall perform in accordance | ce with Rule .1961. | |
| II. Monitoring: As required by Rule .1961. Maintenance: As required by Rule .1961. Other | | |
| III. Maintenance: As required by Rule .1961. Other Subsurface system operator require | | |
| | ditional operation conditions, maintenance and reporting. | |
| IV. Operation: | and reporting. | |
| | | |
| V. Other: | | |
| - MANIGIO D-BOX X | Pump Alarm H20Line | □ PWR Line |
| | / | - rwk Line |
| Following are the specifications for the sewage disposal sy | ystem on the above captioned property. | |
| | | Tank: 1000 gallons |
| , | exact length width of depth | 7 = |
| Prainage Field ditches Linear | of each ditch 424 feet ditches 3 feet ditche | es inches |
| Trench Drain nequires. | | |
| Labora I South Long | Mel a REHS Date 8-12-2 | 5 |
| Authorized State Agent | 19 W REHS Date 8-12-2 | |