

HTE # 04-5-991721

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

17793

OPERATIONS PERMIT

Name: (owner) Dora L. Turner New Installation Septic Tank Repair

Property Location: SR# 1583 Nitrification Line Expansion

Subdivision _____ Lot # _____ Tax ID # _____ Quadrant # _____

Contractor: Hardee Registration # _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50 ft.

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

Type of system: Conventional Other EZflow

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 5 exact length of each ditch 50 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain Required: _____ Linear feet

Date: 9/13/2005

PERMIT NO. 21988

Inspected by: Sup McLean R.S.

