Harnett County Department of Public Health 25648 **Operation Permit** PERMIT # \_\_\_\_ A New Installation Septic Tank Mitrification Line Repair Expansion PROPERTY LOCATION: 3434 NC 2105. Angus Strickland SUBDIVISION \_\_\_\_\_ Registration # System Installer: Highes Strickland Basement with plumbing: Garage Number of Bedrooms 150 GPD MAX Type of Water Supply: 

Community Public Well Distance from well \_\_\_\_\_ feet System Type: Coquentional Gravel II a 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. nEPOI2 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. PUMP TO CONVENTIONAL ALZA REPAIR WHEN IN REAR INSTALLED PERMITS UNDER THE PAD IMPRESSICIA OF FARM EXEMP: \* SYSTEM COMPLETELY UNCOVERED AND SHOP DISOLAVED FOR APPROVAL SYSTEM? 3 Mrs PAD - EXACTLY SET OFF SHOP W/ LINE 2 1 - D.BOX DISTRIBUTION - APPROX GOFT CLAVEL LINES TANK 10FT OFF E SHOP W PERMIT CONDITIONS: A D-30X 3FT FROM 1. Performance: System shall perform in accordance with Rule .1961. JUNAT. Y 11. Monitoring: As required by Rule .1961. NC 2105. III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes 🗆 No 🖵

Type of system: Conventional Conventional Other Subsurface No. of Conventional Conv

French Drain Required: \_\_\_\_\_Linear feet

Authorized State Agent

Date 07/05/2019