25305

## HTE# BRESIE10-C034/2 Harnett County Department of Public Health Operation Permit New Installation Septic Tank Nitrification Lin PROPERTY LOCATION: 126 Department of Public Health

| New Installation Septic Tank Instrification Line Repair Expans   | sion |
|--|------|
| PROPERTY LOCATION: 126 Delang Ct. (Sugs Rd. 5R1727)  |      |
| Name: (owner) Mark Craft SUBDIVISION Walts Erossing LOT # 3  |      |
| System Installer: Garage Number of Bedrooms 3  |      |
| Basement with plumbing:  Garage Number of Bedrooms 3  Type of Water Supply: Community Public Well Distance from well 57 feet   |      |
| System Type: 35% reaction 55. The 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.  |      |
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| L.   |      |
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| DECK RESOUTION   |      |
| REPAIL ALEA  NEPAIL ALEA   |      |
| REPAIR AREA  |      |
| anue D   |      |
|  |      |
|  |      |
| DIW BOR MAN  |      |
| 9' 55- 9'  |      |
| 9' 5' EXT  |      |
| NEW 57) Et FLUS 75(3) WELL   |      |
| 2250 4 28510   |      |
| d dd   |      |
| 10'  |      |
| 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  No   |      |
| If yes, see attached sheet for additional operation conditions, maintenance and reporting.   |      |
| IV. Operation:   |      |
| V. Other:  |      |
|  |      |
| □ D-Box □ Pump □ Alarm □ H20Line □ PWR   | Line |
| Following are the specifications for the sewage disposal system on the above captioned property.   |      |
| Type of system: Conventional Subsurface No. of exact length gallos Subsurface Subsurface No. of exact length gallos Subsurface No. of exact length | ns   |
| 7  |      |
| Drainage Field ditches of each ditch feet ditches feet ditches inches French Drain Required: Linear feet   |      |
|  |      |
| Authorized State Agent Date 01 11 2019   |      |
| Authorized State Agent Only Date Of 11 2019  | - 1  |