HTE# BRES 1902 -0030

Harnett County Department of Public Health

25452

PERMIT # _ 30534	Operation Permit	
	✓ New Installation ✓ Septic Tank ✓ Nitrification Line ☐ Rep	air Fynansian
	PROPERTY LOCATION: 1/2 1/2	an Lypansion
Name: (owner) PLJS Propudie's	PROPERTY LOCATION: /tary 47 L	OT //
	ZORDIAIZION	OT #
System Installer: NICK TART	Registration #	
Basement with plumbing: Garage Number of Bedrooms		
Type of Water Supply: Community Public Well	Distance from well feet	
System Type: 75% 1750 UCTUN Syston Typ (In accordance with Table V a)	Types V and VI Systems expire in 5 years.	
(III accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for permit renewa	ıl.
This system has been installed in compliance with applicable North Carolina General State	utes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction	Authorization
12'-15'	2500 Jas Neal 18 18 18 18 18 18 18 18 18 18 18 18 18	
PERMIT CONDITIONS:	Hwy 12	
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:	on 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 a		
Type of system: Conventional Other 25% NED O		gallons
Subsurface No of exact length	width of donth of	
Drainage Field ditches 4 of each ditc	th 100 feet ditches 3 feet ditches 12	inches
French Drain Required: Linear feet		
C M	1 Daries	
Authorized State Agent	mlan Date 7-26-19	
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