HTE# 13-5-31460

Harnett County Department of Public Health

23069

PERMIT # 27519

Operation Permit

remiii #	<u>operation retinit</u>	
	New Installation 🛛 Septic Tank 🔀 N	litrification Line 🗆 Repair 🗆 Expansion
	PROPERTY LOCATION: HOOVER RO (
Name: (owner) RIDDLE RESIDENTIAL CO		LOT # <u></u>
System Installer: BRENT RIODLE	Registration #	
Basement with plumbing: Garage Number of Bedroom		
Type of Water Supply: Community Public Well		
System Type:	Types V and VI Systems expire in 5	
(iii accordance with Table V a)	Owner must contact Health Department 6 months prior t	to expiration for permit renewal.
This system has been installed in compliance with applicable North Carolina General S	tatutes. Rules for Sewage Treatment and Disposal, and all conditions of the	Improvement Permit and Construction Authorization
Pono	A CULINS E AN E ME NT HOUSE 15' 15'	
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:		
III. Maintenance: As required by Rule .1961. Other:	No 🔀	
If yes, see attached sheet for additional open		
IV. Operation:		
V. Other:		
-	□ Alarm □	U201 inc □ DWD ! ·
		H20Line
Following are the specifications for the sewage disposal system on the Type of system: Conventional X Other		gallons Pump Tank: gallons
Subsurface No of exact lend	oth width of	depth of
Drainage Field ditches of each d	litch 270 feet ditches 3	feet ditches 18 inches
French Drain Required:		
Authorized State Agent	Parts Date_	12)20/13

