HTE# 51701903-0018

Harnett County Department of Public Health

25650

PERMIT # 36498

Operation Permit

| | New Installation Septic Tank Nitrification Line Repair | ynansion |
|--|--|----------|
| 11 | PROPERTY LOCATION: 2873 Holly Springs Ch. Rd. (Sa SubdivisionLOT # | r 171 |
| Name: (owner) _ Sammy Manseil) | SUBDIVISION | 1070 |
| - Corpe | | |
| Basement with plumbing: Garage Number of Bedrooms | 3 | |
| Type of Water Supply: Community Public Well | Distance from well feet | |
| System Type: Convertional Sp. I | 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 invested in | A | |
| system has been installed in compliance with applicable North Carolina General Sta | statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. | |
| TIME CHIPS CANPS G3(4) 25% ADD MEDAIL A LIEA | 3/3 6 30 STD P | |
| PERMIT CONDITIONS: | | |
| l. Performance: System shall perform in accordance with Rule 1 | 1961. | |
| II. Monitoring: As required by Rule 1961. III. Maintenance: As required by Rule 1961 Other: | | |
| | | |
| Subsurface system operator required? Yes \(\sigma\) No | 0 🔀 | |
| V. Operation: If yes, see attached sheet for additional operation. | on conditions, maintenance and reporting. | |
| | | |
| d. Other: | | |
| □D-Box □Pump □ | □Alarm □ H20Line □ P | |
| ollowing are the specifications for the sewage disposal system on the al | Alarm | WR Line |
| ype of system: Conventional Other Tipe C | hi 0 5 TT Ch Sentic Tank: 1 CCC - 11 - 12 - 13 | |
| ubsurface No. of exact length | | gallons |
| rainage Field ditches of each ditch | th Ca 3 foot distance 2 | 0.5 |
| rench Drain Required: Linear feet | reet ditches feet ditches inche | :3 |
| 1 | 1 de la companya del companya de la companya del companya de la co | |
| uthorized State Agent | Date 07 11 2019 | |
| | Date | - |