Harnett County Department of Public Health 25926 **Operation Permit** PERMIT # \_\_\_\_N New Installation Septic Tank Nitrification Line Repair Expansion PROPERTY LOCATION: 6262 NC 217 Name: (owner) Wellons reality Inc. SUBDIVISION Seth & Leigh Thompson LOT # 1 System Installer: \_Cora Gillert Registration # Basement with plumbing: 
Garage Number of Bedrooms Type of Water Supply: 

Community Public Well Distance from well \_\_\_\_\_\_\_ feet System Type: 25% Bedockion \_\_\_\_\_ Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewal. (In accordance with Table V a) 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. BRIVEWAY BARN 3 L& 6 PROPER POOL Q4 CHAMBER D -7 PERMIT CONDITIONS: System shall perform in accordance with Rule . 1961. Performance: l. II. As required by Rule . 1961. Monitoring: III. Maintenance: As required by Rule .1961. Other: \_ Subsurface system operator required? Yes 
No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: □\_\_\_\_\_Pump □\_\_\_\_\_Alarm □ H20Line □ D-Box **PWR Line** 

Drainage Field ditches of each ditch French Drain Required: Date Authorized State Agent\_

Septic Tank: 1250 gallons Pump Tank: \_\_\_\_\_

width of

depth of

Following are the specifications for the sewage disposal system on the above captioned property.

2 Other O4 Chamber III a

exact length

Subsurface

Type of system: 

Conventional

No. of