HTE# Breszon - Harnett County Department of Public Health

No. 26130

PERMIT # NIX	<u>Uperation Permit</u>
⊠	New Installation 🗵 Septic Tank 屋 Nitrification Line 🗌 Repair 🗀 Expansion
	PROPERTY LOCATION: 3855 US 401 N.
Name: (owner) MANGIE MCCLAIN	
System Installer: HMOLD CENTER BLO SEPT	
Basement with plumbing: Garage Number of Bedrooms 3	
	ce from well feet
System Type: 25% NEDUCTION SYSTEM II	
(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, Rule	s for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
	*GRANITY TO SERIAL
	DISTRIBUTION CHAMBER
	CONSELTED @ HEADERS
	PMKING * FOUN(4) 62FT LINES
	& GRAVITY TO SOSIO REDUCTION
332	
	HONIZONATAL PROPES
	TEPAIR ANEA
	20 T DECK/PONCHES SHACL
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HEALES AND A ACTOR A	J BETBAREL
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	7 2 2 2
2000	3 -25-
PERMIT CONDITIONS:	
Performance: System all perform in accordance with Rule :1961.	
II. Monitoring: As required by Rule .1961.	01 2.
III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes 🗆 No 💢	
If yes, see attached sheet for additional operation cond	itions, maintenance and reporting.
IV. Operation:	1 0
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V. Other:	
□ D-Box □ Pump □ _	Alarm 🗆 H20Line 🗆 PWR Line
Following are the specifications for the sewage disposal system on the above ca	ptioned property.
Type of system:  Conventional Other O+ Chunks	Septic Tank: 1000 gallons Pump Tank: gallons
Subsurface No. of exact length	width of depth of
Drainage Field ditches of each ditch	62 feet ditches 3 feet ditches 18 inches
French Drain Required:Linear feet	
Authorized State Agent	04/21/22