HTF# 18-5-43923

Harnett County Department of Public Health

25388

HIEH_VO-J	13160 Harriett Co	Julity Departille	ent of Fublic fleat	UII	
PERMIT #3c	x58	Operation		S/L 15 8	
		New Installation	Septic Tank Nitrif	ication Line 🗆 Repair [Expansion
		PROPERTY LOCAT	1101: 447 Deanne	c Ln. (Bailes:	Krds/4
Name: (owner)t	So Durane Currin	SUBDIVISION	Quail Hollow	PH a LOT #	
System Installer: _	Larry Sharpe	Registration	n #		
Basement with plumb	ing: Garage Number of Bedrooms	_3			
	: Community Public Well				
	25% reduction 375.		V and VI Systems expire in 5 year		
(In accordance with T	able V a)	Owner Must contact Health	n Department 6 months prior to ex	opiration for permit renewal.	
This system has been insta	led in compliance with applicable North Carolina General Str	atutes, Rules for Sewage Treatment a	nd Disposal, and all conditions of the Impr	ovement Permit and Construction Authori	zation.
	WELLA	The second se			
	50 1531				
	=30			EXT	
	K	2009 1500	TION - STO' - T	3 DELL	
	\	263/3 . 2631	1 servick		
		NEO+n-			
		ANER			
			V 45	MAL DISTRIBUTI	A.3
		04 CHAMBER	71 03		0,0
	14	2425	-	CHLMBER	
		24 EV	4 61:	JE 1 3 67 FT	
	6'	4.5'		VE 2: GRET	
	all to see a s	(3- A41 101		UE 31 62FT	
		1 Cer 1		NE 4: 54FT	
	عدرم	1	L1		
		3132 51=10			
		14			
		W/			
	الله ا	PUMP TO	D		
	/	REPAIR	1		
	11.	AMEA	<i>y</i>		
			É		
PERMIT CONDITIONS:		- Australian		17.5.38	
. Performance:	System shall perform in accordance with Rule	.1961.			
I. Monitoring:	As required by Rule .1961.				
II. Maintenance:	As required by Rule .1961. Other: Subsurface system operator required? Yes \Box				
	If yes, see attached sheet for additional opera		and reporting		
V. Operation:	if yes, see attached sheet for additional opera	tion conditions, maintenance	and reporting.		
				7.3	
. Other:					
	D-Box Pump		larm 🗆	H20Line 🗆	PWR Line
	ifications for the sewage disposal system on the				
ype of system:				gallons Pump Tank:	gallons
ubsurface Orainage Field	No. of exact leng	itch <u>a40</u> feet	width of ditches 3	depth of feet ditches	inches
	continues tinear feet	nui <u>va v</u> ieet	unches	feet ditches	mcnes

Authorized State Agent____

Date 04/18/2019