## HTE# 3725 2002-0072 Harnett County Department of Public Health

No. 26667

PERMIT #	Operation Permit	
TEMIN #	New Installation Septic Tank Nitrification Line Repair Ex	xpansion
	PROPERTY LOCATIONS 2030 Mclan CX RD	
Name: (owner) James Wright	SUBDIVISIONLOT #	
System Installer: For ten Spic	Registration #	
Basement with plumbing: Garage Wumber of Bedrooms	s <u>4</u>	
Type of Water Supply:  Community Public Well System Type:   Charles		
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for permit renewal.	
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This system has been installed in compliance with applicable North Carolina General S	itatutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.	
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3	Repair	
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DEDMIT CONDITIONS.		Moles .
PERMIT CONDITIONS:  I. Performance: System shall perform in accordance with Rule	e .1961.	avec
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes		
IV. Operation:	ration conditions, maintenance and reporting.	
V. Other:		
□ D-Box □ Pum	np 🗆 Alarm 🗆 H20Line 🗀	_ PWR Line
Following are the specifications for the sewage disposal system on the	ne above captioned property. 1250	
Type of system:  Conventional Other 25% 1889	Septic Tank: 1200 gallons Pump Tank:	_ gallons
Subsurface No. of exact ler  Drainage Field ditches 3 of each	ngth width of depth of ditches 3 feet ditches 28-20 in	nches
French Drain Required: Linear feet	until 1 rect untilies 1 rect untilies 1 rect	
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Authorized State Agent	Janhan 1245 Date 11-26-26	