HTE# DIES 2008-0041

Harnett County Department of Public Health

No. 26738

	<i>i</i> 1
PERMIT #	Deration Permit New Installation Septic Tank Nitrification Line Repair Expansion
	PROPERTY LOCATION: 197 JAMES NOWS 15 (SN1440)
Name: (owner)CONNIE ADAMS	SUBDIVISIONLOT #
	Registration #
Basement with plumbing: Garage Number of Bedrooms	. 7
Type of Water Supply: Community A Public Well	Distance from well feet
System Type: 25% NEOUXTION STS. 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 installed in compliance with applicable North Carolina General Si	Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
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PERMIT CONDITIONS: Jacobs Conditions: Jacobs Conditions Note: The Section of the Condition of the Conditi	~~15 75 (5~ 1440)
II. Monitoring: As required by Rule .1961.	·
III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes \square	
If yes, see attached sheet for additional opera	ration conditions, maintenance and reporting.
IV. Operation:	
V. Other:	
□ D-Box □ Pump	np 🗆 Alarm 🗆 H20Line 🗆 PWR Line
Following are the specifications for the sewage disposal system on the	
Type of system: Conventional Other 64 CA	
Subsurface No. of exact leng	ngth width of depth of
	ditch <u>60</u> feet ditches <u>3</u> feet ditches <u>24</u> inches
French Drain Required: Linear feet	
Authorized State Agent	Date 11/04/2020
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