

HTE# 08-5-19317

# Harnett County Department of Public Health

20189

PERMIT # 24526

## Operation Permit

New Installation  Septic Tank  Repair  Nitrification Line  Expansion

PROPERTY LOCATION: \_\_\_\_\_

Name: (owner) WEATHERLY HOMES INC SUBDIVISION ARBOR CREST LOT # 13

System Installer: MIKE RAY Registration # \_\_\_\_\_

Basement with plumbing:  Garage  Number of Bedrooms 3

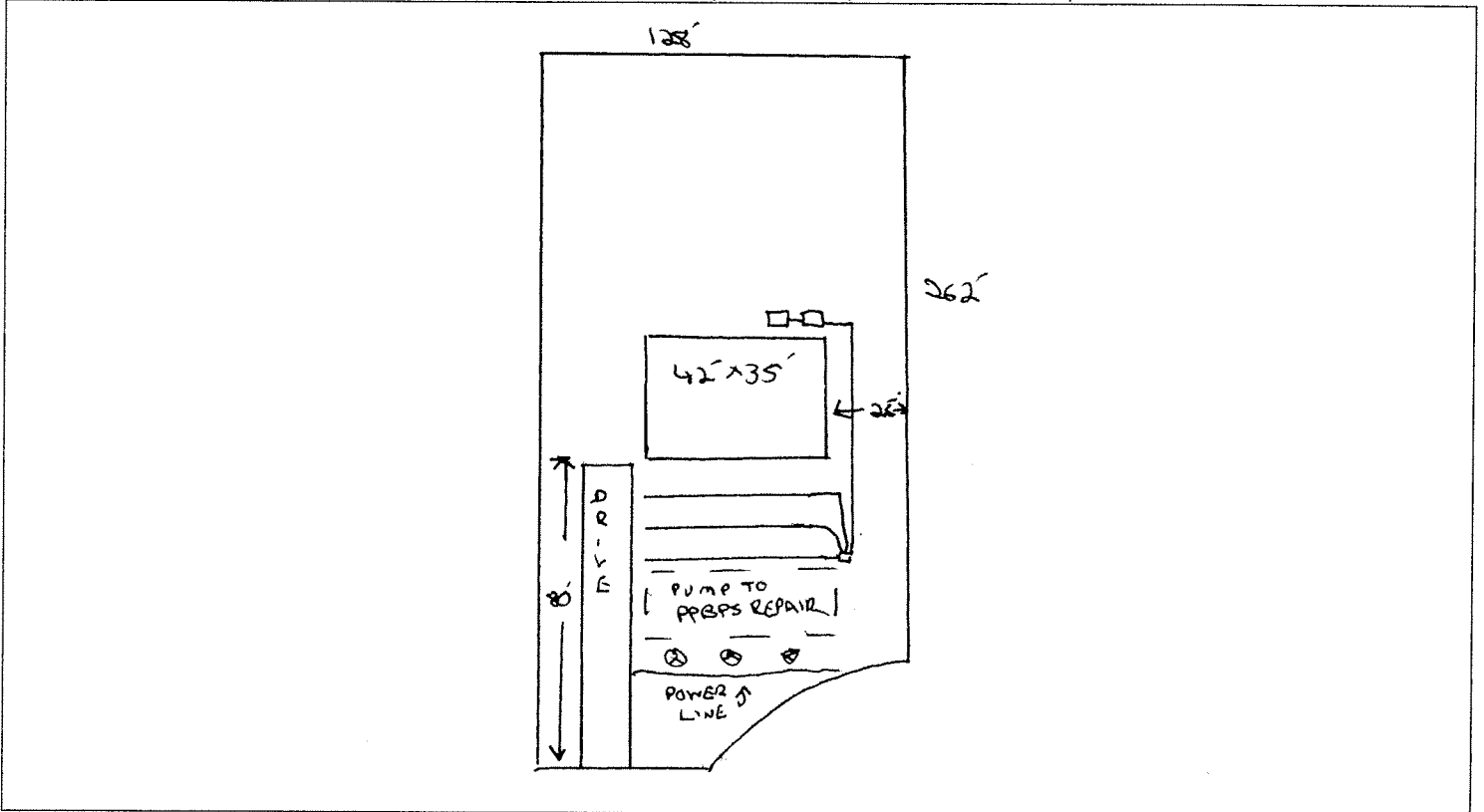
Type of Water Supply:  Community  Public  Well Distance from well 100 feet

System Type: IIIb 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 Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.



### PERMIT CONDITIONS:

- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- 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: \_\_\_\_\_
- V. Other: INITIAL AND REPAIR AREA REVERSED FROM IP/CA

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

Type of system:  Conventional  Other PUMP TO PPBS Septic Tank: 1000 gallons Pump Tank: 1000 gallons  
 Subsurface Drainage Field No. of ditches 3 exact length of each ditch 50 12 PANELS feet width of ditches 2 feet depth of ditches 34 inches  
 French Drain Required \_\_\_\_\_ Linear feet

Authorized State Agent [Signature] Date 7/2/08