HTE#Harnett County Department of Public Health 20437
PERMIT # _ 2511Z Operation Permit
🗹 New Installation 🗹 Septic Tank 🗆 Repair 🗹 Nitrification Line 🗆 Expansion PROPERTY LOCATION: جمع مستحم
Name: (owner) <u>-14300 + Heathen Browsn</u> SUBDIVISION <u>Royal Grest</u> LOT # <u>7</u>
Name: (owner)
Type of Water Supply: 🗋 Community 🗹 Public 🔲 Well 🛛 Distance from well feet
System Type: <u>2536 REDUCTION System</u> Type THE 6 ELLAY (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.
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PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule .1961.
II. Monitoring: As required by Rule .1961.
III. Maintenance: As required by Rule .1961. Other:
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:
V. Other:
Following are the specifications for the sewage disposal system on the above captioned property.
Type of system: Conventional Image: Other 25% REDUCTION System Septic Tank: 1000 gallons Pump Tank: gallons Subsurface No. of exact length width of depth of
Subsurface No. of exact length / width of depth of Drainage Field ditches <u>4</u> of each ditch <u>80</u> feet ditches <u>3</u> feet ditches <u>26"-318"</u> inches
French Drain Required: Linear feet
Authorized State Agent mes 2 Mawhant II NS Date 3-24-09
Authorized State Agent Date Date 3^24-09