No. 26337

HTE# 5=01906.0059

## Harnett County Department of Public Health

Operation Permit

FEMILI #	operation remit	
		Nitrification Line  Repair  Expansion
	PROPERTY LOCATION: 503 BALL	LNOS 2015 (521437)
Name: (owner) MICHAEL WELVES	SUBDIVISION	LOT #
System Installer: JASON MATTHENS	Registration #	-
Basement with plumbing:  Garage  Number of Bedrooms	4	4
Type of Water Supply:   Community   Public   Well	Distance from well SB+ feet	
System Type: 25% RENCTION 513. III		The state of the s
(In accordance with Table V a)	Owner must contact Health Department 6 months p	ribr to expiration for permit renewal.
This system has been installed in compliance with applicable North Carolina General Stat	R	Share to the state of the state
This system has been histained in compnance with appreciate north caronina declarations	12/1/2/ at	AT-GALDE 25%
	The feet of the second	* D. BOX FECURE DISTUBUTION
	20 Pool 2 Pool	
	200 00 18 N	SE AIN SERVING THE
PERMIT CONDITIONS:	I V E	
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 If yes, see attached sheet for additional operator.		437)
IV. Operation:		
V Other		
V. Other:		DWD I:-
D-BoxPump		H20Line PWR Lin
Following are the specifications for the sewage disposal system on the		SD college Dump Tarlin
Type of system: ☐ Conventional ☑ Other ☑ € ፫ ፫ ☐ Subsurface No. of exact leng		gallons Pump Tank: gallons  depth of
Subsurface No. of exact leng Drainage Field ditches + of each di	tch 90 feet ditches	
French Drain Required: Linear feet	· · · · · · · · · · · · · · · · · · ·	The state of the s
Authorized State Agent	Da Da	te 03 09 2021