Harnett County Department of Public Health

24650

PERMIT # _ 29376	<u>Operation Permit</u>	
	New Installation - Septic Tank Ni	
	PROPERTY LOCATION: 1193 Folias	
Name: (owner) Charles Marshall Johnson	SUBDIVISION	LOT #
System Installer: Odis Strickland	Registration #	
Basement with plumbing: Garage Momber of Bedrooms	<u>a</u>	
Type of Water Supply: Community Public Well	Distance from well feet	
	Types V and VI Systems expire in 5	* Control of the Cont
(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.		
TES FLOW GOLD ANTA	DRIVE EXT CMPORT EXT 2BR SFD SFD AREA 277	POWER POLE
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule 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 opera	1961.	Description
IV. Operation:	uni Conditions, mantenance and reporting.	
V. Other:		
□ D-Box □ Pump	□Alarm □	H20Line D PWR Line
Following are the specifications for the sewage disposal system on the		
Type of system: Conventional Other Ex F	Flow III Septic Tank: 1000	8 10
Subsurface No. of exact leng	gth width of	depth of
Drainage Field ditches of each d	itch <u>90</u> feet ditches <u>3</u>	feet ditches ZZ inches
French Drain Required: Linear feet		
Authorized State Agent	Coor, NEHS Date_	07/24/17