Harnett County Department of Public Health HTE# 14-5-33774 23778 Operation Permit

New Installation ☑ Septic Tank ☑ Nitrification Line □ Repair □ Expansion PERMIT # 27884 PROPERTY LOCATION: Itmy 301 N LOT # Name: (owner) <u>Jereny</u> STACKIAND SUBDIVISION \_\_\_\_ Registration # \_\_\_\_\_ System Installer: Basement with plumbing: 
Garage 
Number of Bedrooms Type of Water Supply: 
Community Public Well Distance from well \_\_\_\_\_\_ feet System Type: 25% REDUCTION System Type III G EZUATYPES V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewal. (In accordance with Table V a) ment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. This system has been installed in compliance with applicable North Carolina General Statutes, Rule ack Hwy 301N 3020 PERMIT CONDITIONS: System shall perform in accordance with Rule . 1961. Performance: l. As required by Rule .1961. II. Monitoring: As required by Rule .1961. Other: \_ III. Maintenance: Subsurface system operator required? Yes  $\square$  No  $\square$ If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: □ Pump □ \_\_\_\_\_Alarm □ \_\_\_\_\_H20Line □ \_\_\_\_\_ PWR Line D-Box Following are the specifications for the sewage disposal system on the above captioned property. Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

Authorized State Agent

Linear feet

Type of system: 

Conventional

Subsurface

Drainage Field French Drain Required: No. of

ditches

1 Other 25% Words

of each ditch /00 feet

exact length

Date

width of

ditches \_

depth of

ditches 18-24 inches