

HTE# 15-5-36827R

Harnett County Department of Public Health

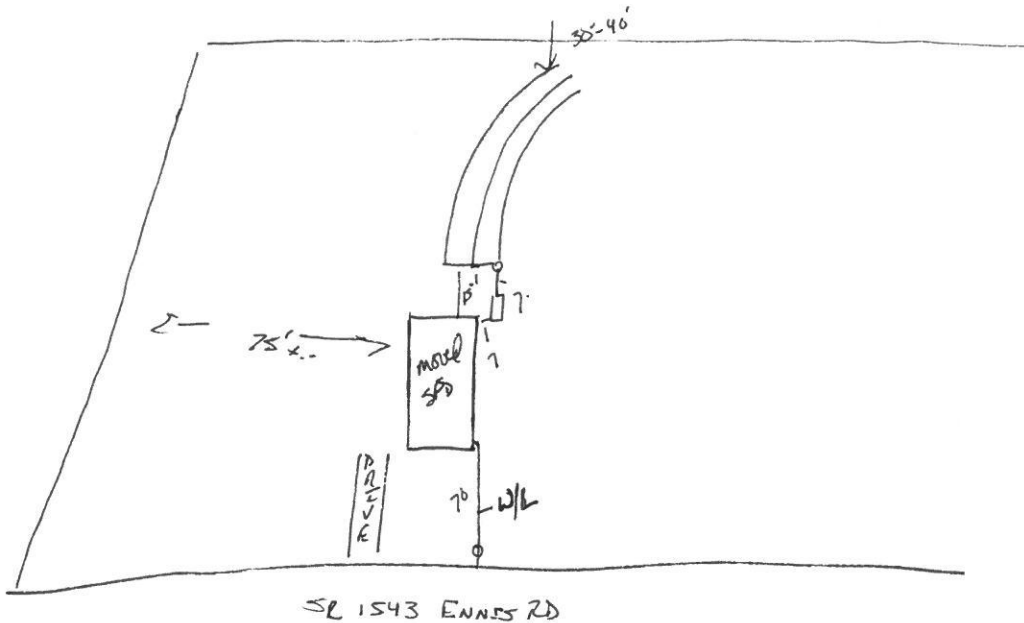
23910

PERMIT # 28589Operation Permit☒ New Installation ☒ Septic Tank ☒ Nitrification Line ☐ Repair ☐ ExpansionPROPERTY LOCATION: SL 1543 ENNIS RDName: (owner) Kenneth Gardner SUBDIVISION _____ LOT # 4System Installer: OFFIS SPRICKLAND Registration # _____Basement with plumbing: ☐ Garage ☐ Number of Bedrooms 3Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well _____ feetSystem Type: 15% REDUCTION SYSTEM TYPE III 6 EQUAL 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: _____

☐ D-Box ☐ Pump ☐ Alarm ☐ H2O Line ☐ PWR Line

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

Type of system: ☐ Conventional ☒ Other 15% REDUCTION SYSTEM Septic Tank: 1000 gallons Pump Tank: _____ gallonsSubsurface Drainage Field No. of ditches 3 exact length of each ditch 80 feet width of ditches 3 feet depth of ditches 26" inches

French Drain Required: _____ Linear feet

Authorized State Agent

James E. MarkhamDate 2-29-16