HTE# 06-5-15754R

## Harnett County Department of Public ... alth 18914

| 111111111111111111111111111111111111111      | That test double to the treatment of the |         |
|--|--|---------|
| PERMIT # 23310                               | Operation Permit   |         |
|  | New Installation Septic Tank Repair Nitrification Line Expa  | ansion  |
|  | PROPERTY LOCATION: 512-1429 Chaly beals RD   |         |
| Name: (owner) Bries                          | N TOHNSON Builders INC SUBDIVISION DEXTRAFTED LOT # 29   |         |
|  | Registration #   |         |
| Basement with plumbing: [                    | ☐ Garage ☑ Number of Bedrooms  |         |
| Type of Water Supply:                        |  |         |
| System Type: 2896101                         | Va)  Type II G  Types V and VI Systems expire in 5 years.  Owner must contact Health Department 6 months prior to expiration for permit renewal.   |         |
| (III accordance with Table                   | valet must contact nearth beparament o months prior to expiration for permit renewal.  |         |
| This system has been installed in            | n 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:                           |  |         |
|  | ystem shall perform in accordance with Rule .1961.   |         |
|  | s required by Rule .1961. s required by Rule .1961. Other:   |         |
|  | ubsurface system operator required? Yes No   |         |
|  | yes, see attached sheet for additional operation conditions, maintenance and reporting.  |         |
| IV. Operation:                               |  |         |
| V Osbari                                     |  |         |
| V. Other:                                    |  |         |
| Following are the specificat                 | ations for the sewage disposal system on the above captioned property.   |         |
| Type of system:   Con-                       | nventional Other 15% NO Stage of tank: Septic Tank: 1000 gallons Pump Tank:  | gallons |
|  | o. of exact length width of depth of itches Z of each ditch 120 feet ditches 3 feet ditches 16-7/8 incl  |         |
| Drainage Field dit<br>French Drain Required: | itches $\frac{Z}{Linear}$ of each ditch $\frac{120}{120}$ feet ditches $\frac{3}{Linear}$ feet ditches $\frac{3}{Linear}$ feet   | nes     |
|  |  | _       |
| Autorial Comp. 1                             | Dans 5 M 1 Jens 1 1007   |         |