HTE#\_06-5-16465

## Harnett County Department of Public Health 19368

PERMIT # 2352)

Operation Permit

	🛛 New Installation 🔀 Septic Tank 🔲 Repair 🕱 N	litrification Line 🔲 Expansion
~	PROPERTY LOCATION: LEMUEL BLACKRO	
Name: (owner) QUEST DEV. CO. IN C	SUBDIVISION CATEMENT	LOT # 43
System Installer: OTIS STRICKUMD	Registration #	
Basement with plumbing:  Garage Mumber of Bedrooms	3	
Type of Water Supply: Community Public Well	Distance from well \OO feet	
System Type:	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	or narmit ranawal
		•
This system has been installed in compliance with applicable North Carolina General St	atutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Perr	nit and Construction Authorization.
	P T POMP TO TI	
	1 PARTIAL 2570	
	V 40' REDUCTION   REPAIR	
	65 ×60'	
	15	
	0000	
	PARTIAL	
	10 35%	
	REDUCTION   REPAIR	
	AREA	
	1/19.	
PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance with Rule .	1041	
II. Monitoring: As required by Rule .1961.	.1701.	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes N	, X	
If yes, see attached sheet for additional operation	ion conditions maintenance and resembles	
IV. Operation:	ton conditions, maintenance and reporting.	
V. Other:		
Following are the specifications for the sewage disposal system on the	phaya continued property	
Type of system:   Conventional   Other POLYST XIEW	7	<b>*</b> 1 "
Subsurface No. of exact length	m width of gallons Pu	Imp Tank: gallons
Drainage Field ditches of each dit	th <u>180</u> feet ditches 3 feet d	depth of 20-30 inches
French Drain Required: Linear feet	ch 180 leet ditches feet d	litches inches
Authorized State Agent	R> Date $8/21/6$	) T)
1801	Date $8/2/6$	)_/