HTE#OT	-5-	16751	2
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Harnett County Department of Public Health

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PERMIT # <u>26</u>	139	<u>Operat</u>	<u>ion Permit</u>		22216
		New Installa	tion 🗷 Septic Tank 🗵	Nitrification Line	Renair Evnancior
	0 -	PROPERTY	LOCATION: LEMUEL P	Lex lo	nepan Lixpansion
Name: (owner) _	BILL CLARK 1	tomes SUBDIVIS	ION GATEWEST		LOT # <u>26</u>
	- WAYNE JONES	Regist	ration #	-w	LUI # _ <u>&&</u>
Basement with plum		f Bedrooms <u>3</u>			
	ly: 🗆 Community 🔀 Public	☐ Well Distance from well	100 feet		
System Type: (In accordance with	Table V a)	A	Types V and VI Systems expire in !	5 years.	
(in accordance with	Table Vaj	Owner must contact	Health Department 6 months prior	to expiration for permit r	enewal.
This system has been inst	alled in compliance with applicable North Caroli	na General Statutes, Rules for Sewage Trea	tment and Disposal, and all conditions of the	e Improvement Permit and Constr	uction Authorization
		House DR-24	REnmINGTAL BY	90 mm	
		mossburg C	1		
PERMIT CONDITIONS:					
I. Performance:	System shall perform in accordance	with Rule .1961.			
II. Monitoring: III. Maintenance:	As required by Rule .1961. As required by Rule .1961. Other:				
Transcendince.	Subsurface system operator required?	Yes D No			
	If yes, see attached sheet for addition	nal operation conditions, maintena	ance and reporting.		
IV. Operation:					
V. Other:					
	D-Box	Pump	Alarm 🗆	H20Line □	PWR Line
Following are the speci	ifications for the sewage disposal system		-		FWK LINE
Type of system: \Box	Conventional X Other Creek	mBFD_(Q47)	·	gallons Pump Tank: _	gallons
		xact length	width of	depth of	Rainoil3
Drainage Field French Drain Required:	ditches 0	f each ditch <u>230</u> fee	t ditches 3	feet ditches	inches
Trench Main Required:	Muest fee				
Austhonizad Caras		M.		~	
Authorized State Ag	enr / / ///	SEAR.	Date	2/17/12	