

TE# 01-2-1 1335	Harnett County Department of Public Health	196
PERMIT # 2409)	Operation Permit	170.
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	New Installation Septic Tank Repair Nitrifi	ication Line 🔲 Expansio
Name (owner) KEN Days and Id 5 1	PROPERTY CONTROL OF THE CONTROL OF T	
Name: (owner) KEN DANSON HOMES ! System Installer: FOUR SERSON	NC SUBDIVISION BENNET PLACE	LOT # <u>2</u> .C
Basement with plumbing: Garage Mumber of Bedrooms	Registration #	
Type of Water Supply: Community Rumber of Bedrooms Type of Water Supply: Well	B	
System Type:	Distance from well 100 feet	
(In accordance with Table V a)	Types V and VI Systems expire in 5 years.	,
_	Owner must contact Health Department 6 months prior to expiration for per	
This system has been installed in compliance with applicable North Carolina General Stat	utes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and	Construction Authorization
	29'	CONSTRUCTION AUTHORIZATION
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	F122 \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
	REPAIR AREA	
	# E 226'	
	1	
	154	
	58 x44'	
	D	
	72	
	;	
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PERMIT CONDITIONS:		
. Performance: System shall perform in accordance with Rule .19. I. Monitoring: As required by Rule 1961.	61.	
no required by hate .1701.		
required by hale 1701. Other.		
Subsurface system operator required? Yes No If yes, see attached sheet for additional operation Operation:	XI Conditions and the conditions are the conditions	
V. Operation:	conditions, maintenance and reporting.	
Other * COVER STILL TO BE CHEC	KED	
ollowing are the specifications for the sewage disposal system on the abo	ve captioned property.	
the of system. I conventional A Other Quick 4 Cia	No Otto E Colon Colon Colon	ik: gallons
exact length	width of depth of	
ench Drain Required: tigear teet	156 feet ditches 3 feet ditches	
Carles Ale		
uthorized State Agent	08	
ministry state when Man and Man	Date 1/-1-07	