HTE#07-5-18629R

## Harnett County Department of Public nealth 19932

PERMIT # 24566

**Operation Permit** 

|   | Mew Installation Mesophic Tank I Repair Mesophic Nitr                                       | ification Line 🔲 Expansion      |
|---|---|---------------------------------|
| News ( ) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \  | PROPERTY LOCATION:  |                                 |
| Name: (owner) WYNN CONTRUCTION  | SUBDIVISION PIONEER FARMS   | LOT # 4                         |
| System Installer: CORET GILBERT   | Registration #  |                                 |
| Basement with plumbing: Garage Number of Bedrooms   | 3   |                                 |
| Type of Water Supply:  Community Public Well  | Distance from well 100 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                       | permit renewal.                 |
| This system has been installed in compliance with applicable North Carolina General State   | utes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit | and Construction Authorization. |
|   |   |                                 |
|   |   |                                 |
|   |   |                                 |
|   |   |                                 |
|   |   |                                 |
|   |   |                                 |
|   | 40  |                                 |
|   |   |                                 |
|   | 37'× 49'  |                                 |
|   | 292   |                                 |
|   |   |                                 |
|   | Lee   |                                 |
|   | REPAIR  |                                 |
|   | AREN D  |                                 |
|   | 1181  |                                 |
|   | 11 11 11 11   |                                 |
|   |   |                                 |
|   | 116 / 11  |                                 |
|   |   |                                 |
|   |   |                                 |
|   | 40'   |                                 |
|   | 100-  |                                 |
| PERMIT CONDITIONS:  | 100   |                                 |
| I. Performance: System shall perform in accordance with Rule .1   | 961.  |                                 |
| 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   | on conditions, maintenance and reporting.   |                                 |
| IV. Operation:  |   |                                 |
| V. Other:   |   |                                 |
| Following are the energifications for the same diseased and   | Luci and an a   |                                 |
| Following are the specifications for the sewage disposal system on the a Type of system:   Conventional Description of System Conventional Conventional Description of System Conventional Description of System Conventional Description of System Conventional Convention of Convention | bove captioned property.  |                                 |
| Subsurface No. of exact length  | Acc. Transch Size of tank: Septic Tank: 1000, gallons Pump width of dept                    |                                 |
|   | 0   | th of                           |
| French Drain Required: Linear feet  | 1 4 feet ditches feet ditch   | hes $18-20$ inches              |
| all II  |   |                                 |
| Authorized State Agent  | PS Date 4/29/07   |                                 |
| 1000  |   |                                 |