HTE# 09-500-21653

## Harnett County Department of Public Health

20587

PERMIT # 25361

Operation Permit

	New Installation Septic Tank Repair Nitrification Line	☐ Expansion
Name: (owner) AQ Contracting	PROPERTY LOCATION: 52 (139	
	SUBDIVISION Tingen Clace LOT #	# 49
System Installer: O. Seckland  Basement with plumbing: Garage Mumber of Bedrooms	Registration #	,
Type of Water Supply: Community Public Well		
System Type: C.7 Flow	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 St	52 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Gal.	453   53	ization.
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DEBUT CONDITIONS		
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 A	40 🕱	
If yes, see attached sheet for additional operation:	tion conditions, maintenance and reporting.	
V. Other:		
Following are the specifications for the sewage disposal system on the	shave captioned property	
Type of system:  Conventional Dother 2.2	Septic Tank: \\ \sqrt{200} gallons Pump Tank: \	gallons
Subsurface No. of exact lengt	th width of depth of	Kanons
Drainage Field ditches of each dit French Drain Required: Linear feet	tch 180 feet ditches feet ditches 1804	inches
French Drain Required: Linear feet		7
Authorized State Agent	Date 05-04-09	
numerica state ngent	Date US O YO I	
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