HTE# 09-5-22134	Harnett County Department	of Public Health	20697
PERMIT # 25491	Operation Pe	rmit	
	New Installation	Septic Tank 🗆 Repair 🖳 Ni	trification Line Expansion
		: Lemuel Blacked	
Name: (owner) HH H Co.		orest Oakr Ph3	LOT # _175
System Installer: Ottis 5- Basement with plumbing: Garage	Number of Bedrooms 3		
	Public Well Distance from well	feet	
System Type:	TTF G Types V an	nd 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 Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.			
·			
		10'	
	-		
	13'	7 }	
		15/201	
	act no House	(*);	
	/	800	
	Pump to Conventional Kepnin		
	K. pain	1	
	Area	1	
PERMIT CONDITIONS:			
I. Performance: System shall perform	n accordance with Rule .1961.		
II. Monitoring: As required by Rule.			
III. Maintenance: As required by Rule . Subsurface system one	yot. Other: ator required? Yes No		
	eet for additional operation conditions, maintenance and r	eporting.	
IV. Operation:		. •	
V. Other:			
r. Out.			
Following are the specifications for the sewage	disposal system on the above captioned property.	1000	
Type of system: Conventional Subsurface No. of		•	mp Tank: gallons
Drainage Field ditches /	exact length of each ditch 240 feet	width of ditches 3 feet d	epth of 24-18 inches
French Drain Required:	Linear feet	- Icci U	mules mules
Λ	116 0 0	.//	
Authorized State Agent Lynn	Muc K.J.	Date _ 7/2/20	09