HTE# 09-5-2224)

Harnett County Department of Public Health 20807

DERMIT	ш	25378
PERMIT	#	ブンマンメ

Operation Permit

	New Installation 🔼 Septic Tank 🗆 Repair 🛛 Nitrification	Line 🗌 Expansion
	PROPERTY LOCATION: WILL LUCAS RO	
Name: (owner) RAM DEVELOPMENT,	SUBDIVISION CAROLINA ONKS	_LOT # <u>5&</u>
System Installer: JONES SEPTIC SERVICE	Registration #	
Basement with plumbing: Garage Number of Bedrooms		
Type of Water Supply: Community Public Well	Distance from well feet	
System Type: The System Type: (In accordance with Table V a)	Types V and VI Systems expire in 5 years.	
(in accordance with rable + a)	Owner must contact Health Department 6 months prior to expiration for permit rene	wal.
This system has been installed in compliance with applicable North Carolina General Sta	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Constructi	ion Authorization
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PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance with Rule .	1961.	
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other:	¥	
Subsurface system operator required? Yes 🗀 N If yes, see attached sheet for additional operat		
IV. Operation:	on conditions, maintenance and reporting.	
V. Other: POWER & WATER LINE ST	ILL TO BE CHECKED	
Following are the specifications for the sewage disposal system on the	above captioned property.	
Type of system: Conventional Other	Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface No. of exact length	A =	•
	th 320 feet ditches 3 feet ditches 22	1 inches
French Drain Required: Linear feet		
Authorized State Agent	REHS Date 550	