HTE# 09-5-22268

Harnett County Department of Public Health

21120

PERMIT	#	25552

Operation Permit

	×	New Installation 🗵 Septic Tank 🗆 Repair 💢 Nitrification Line	☐ Evnancio
A C		PROPERTY LOCATION: LEMUEL BLACK RD	LAPAIISIOI
Name: (owner) OTIS STO			# 137
System Installer: H*14 Cons	ravetors C	Registration #	π <u>101</u>
Basement with plumbing: Garage	Number of Bedrooms	3	
Type of Water Supply: 🔲 Community	🔀 Public 🗌 Well Dis	Distance from well 100 feet	
System Type:	<u> </u>	Types V and VI Systems expire in 5 years.	
(In accordance with Table V a)	Ow	wner must contact Health Department 6 months prior to expiration for permit renewal.	
This system has been installed in compliance with a			
, comprance with a	spicable North Carolina General Statutes,	, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Auth	orization.
		101/	
		ENVERTIONAL 150	
PERMIT CONDITIONS:			
I. Performance: System shall perform	in accordance with Rule .1961.		
ll. Monitoring: As required by Rule lll. Maintenance: As required by Rule			
7	.1961. Uther:		
If yes see attached	perator required? Yes No X		
V. Operation:	sneet for additional operation col	onditions, maintenance and reporting.	
			.
. Other:			
ollowing are the specifications for the	re disposal assessment		
ollowing are the specifications for the seway ype of system: Conventional	Other EZ FLOW) -6	
ubsurface No. of	exact length	Septic Tank: gallons Pump Tank:	gallons
rainage Field ditches \	of each ditch	width of depth of 140 feet ditches 3 feet ditches 20-30	
rench Drain Required:	Linear feet	feet ditches $20-30$	ınches
			1
uthorized State Agent	WILLIAM	-CH3 Date 12/8/09	
0	The state of the s	Date 12809	
	•		