HTE# 09-5-22-354

Harnett County Department of Public Health

21094

DERMIT	#	25296

Operation Permit

Tellini ii a a a a a a a a a a a a a a a a a	<u>operation remite</u>	
	New Installation Septic Tank Repair Nitrification Line	☐ Expansion
Name: (owner)	PROPERTY LOCATION: PONDEROSA RO	
System Installer: TEO BROWN		# 72_
Basement with plumbing: Garage Number of Bedroo	Registration # oms 3	
Type of Water Supply: Community Public W		
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 Genera	al Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Author	orization.
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	25% REDUCTION	
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PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance with Ru	ıle .1961.	
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other:		· -
Subsurface system operator required? Yes	J No X	
If yes, see attached sheet for additional op- IV. Operation:	eration conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		<u>-</u>
Following are the energifications for the savere dispared and a	A. A	
Following are the specifications for the sewage disposal system on t Type of system: □ Conventional 図 Other ついくせ		
Subsurface No. of exact le	8 mono 1 mm 1 mm	gallons
	ength width of depth of ditches 3 feet ditches 24	inches
French Drain Required:	ditents	mones
The state of the s		
Authorized State Agent	REMS Date 11509	
18011	Vale VISIVI	