Harnell County Department of Public Health

Operation Permit PERMIT # 25948 21566 🔀 New Installation 🔀 Septic Tank 🔀 Nitrification Line 🗆 Repair 🗆 Expansion PROPERTY LOCATION: MARKS RO Name: (owner) WM. KENT PIERCE INC SUBDIVISION ASIAEFORD LOT # \5) System Installer: TEO BROWN ___ Registration # Basement with plumbing: Garage Number of Bedrooms Type of Water Supply:

Community Public Public Distance from well 100 , feet ☐ Well 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 General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. 85 189 3 BEDROOM HOUSE LOCKWOOD PR PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule .1961. II. As required by Rule .1961. Monitoring: III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes
No

No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: Pump D-Box Alarm \square H20Line □ **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. Dother Pump 10 CHAMBER Septic Tank: 1000 gallons Pump Tank: 1000 Type of system:

Conventional Subsurface exact length width of depth of ditches 18-24 inches Drainage Field ditches 120 of each ditch _ ditches French Drain Required:

Authorized State Agent