1111#10-5-24157

Harnett County Department of Public Health

HTE# 10-3-2443 / NO	amen county bepartment of rubic near	Π
PERMIT # 26116_	Operation Permit	21591
	🔀 New Installation 🗷 Septic Tank 🔀 Nitrifica	ation Line 🗆 Repair 🗀 Expansior
	PROPERTY LOCATION: MARCHS PS	
Name: (owner) SIGNATURE A		LOT # <u>27</u>
System Installer: OT is Stance		
Basement with plumbing: Garage Numl Type of Water Supply: Community Delta		
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 expi	iration for permit renewal.
This system has been installed in compliance with applicable North	h Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improve	ement Permit and Construction Authorization.
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PERMIT CONDITIONS:		
I. Performance: System shall perform in accord	dance with Rule .1961.	
II. Monitoring: As required by Rule .1961.	4	
III. Maintenance: As required by Rule .1961. Ot Subsurface system operator rec		
	additional operation conditions, maintenance and reporting.	
IV. Operation:		
Y. Other:		
□ D-Box □	Pump 🗆 Alarm 🗆 H20	OLine PWR Line
Following are the specifications for the sewage disposa		
Type of system: Conventional Other E		gallons Pump Tank: gallons
Subsurface No. of Drainage Field ditches	exact length width of of each ditches 3 feet	depth of ditches 36 inches
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Authorized State Agent	RG115 Date 8 16	,10