HTE#10-5-24497

Harnett County Department of Public Health

PERMIT # 🔀	0138	Operation Permit		21572
		New Installation Septic Tank	Nitrification Line	Repair Expansion
Name: (owner)	KENNETH CUMMINGS	LUALERII FACAIIAN: 1.1565	3 KD	
System Installer	" OTIS STRICKLAND	SUBDIVISION ASNEFORD	1	LOT # <u>_40</u> _
Basement with plu	umbing: Garage Number of Redrooms	Registration #		
Type of Water Sur	pply: 🗆 Community 💢 Public 🔲 Well	Distance from well 100 feet		
System Type: (In accordance wit	th Table V a)	Types V and VI Systems exp	pire in 5 years.	
(in accordance wit	in rable v aj	Owner must contact Health Department 6 month	is prior to expiration for permit re	newal.
This system has been in	nstalled in compliance with applicable North Carolina General St.	atutes, Rules for Sewage Treatment and Disposal, and all condition		
	1	o service and one proposal, and an condition	his of the improvement Permit and Constru	ction Authorization.
ERMIT CONDITIONS: Performance:	10, 1	ANEA , TOWER OR , LE , L		
. Monitoring:	System shall perform in accordance with Rule .19 As required by Rule .1961.	76 1.		
l. Maintenance:	As required by Rule .1961. Other:			
	Subsurface system operator required? Yes No	×		
Operation:	If yes, see attached sheet for additional operation	1 conditions, maintenance and reporting.		
Other:				
	D-Box D Pump D			
lowing are the sneci			H20Line 🗆	PWR Line
pe of system:	ifications for the sewage disposal system on the abo Conventional X Other EZ FLOW			
surface	No. of exact length	width of	gallons Pump Tank:	gallons
ninage Field nch Drain Required:	ditches of each ditch	50 feet ditches 3	depth offeet ditches 20	inches
red right reduited:	Linear feet		areares a	mcnes
horized State Age	ent_M_M_	ee Date	8/3/10	