HTE# 10-5-24502R

## Harnett County Department of Public Health

PERMIT # 26321		<u>Operation</u>	n Permit		2201	3
		New Installation	Septic Tank	Nitrification Line	Repair 🗆	Expansion
	-4	PROPERTY LO	CATION: TingenR	. J.		Expansion
Name: (owner) _ 🗸	tone. 1 Bo. Hers	SUBDIVISION	CATION: Tingenk	rt rt	LOT #	164
System Installer: J		 Registrat				. ,
Basement with plumbing:		3				
Type of Water Supply: $\Box$		Distance from well				
System Type:	ШЬ		pes V and VI Systems expire i			
(In accordance with Table \	/ a)	Owner must contact He	alth Department 6 months pr	ior to expiration for permit	renewal.	
This system has been installed in	compliance with applicable North Carolina General Stati	ites Rules for Sewage Treatmen	t and Disposal and all conditions of	C the Improvement Permit and Con-	truction Authorizati	
PERMIT CONDITIONS:		37 R	Area 18 1 D XX YOU WAY	10		
I. Performance: Syst	em shall perform in accordance with Rule .I	961.				
	required by Rule .1961.					
	required by Rule .1961. Other: surface system operator required? Yes 🗆 No		······································		<del></del>	
	es, see attached sheet for additional operation		e and reporting.			
IV. Operation:	•		, ,			
V. Other:						
-			AI —			
	Box 🗆 Pump [			H20Line 🗆		PWR Line
Following are the specification  Type of system:   Conve	ons for the sewage disposal system on the a ntional of Other			) T .	/00A	. 11
Subsurface No.			width of	gallons Pump Tank depth of		gallons
•		h 75 feet	ditches	feet ditches 2		inches
French Drain Required:	Linear feet					
	0			1/		
Authorized State Agent_	Jarya Newin REI	75	Date	8/3/25/1	· w.	<del>,</del>