HTE# 10-5-24595 Harnett County Department of Public Health	
PERMIT # 26144 215	93
🛛 New Installation 🖄 Septic Tank 🖾 Nitrification Line 🗆 Repair	
PROPERTY LOCATION: 27 WEST	·····
Name: (owner) WYMN CONSTRUCTION SUBDIVISION TINCEN POINTE LOT #	<u>+ 97</u>
System Installer: <u>RANDY BATTER</u> Basement with plumbing: Garage X Number of Bedrooms 3	
Type of Water Supply: Community Rublic Well Distance from well <u>100</u> feet	
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 Author	ization.
206'	
PERMIT CONDITIONS:	
I. Performance: System shall perform in accordance with Rule .1961.	
II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes 🗆 No 🔀	
If yes, see attached sheet for additional operation conditions, maintenance and reporting. W. Operation:	
/. Other:	
□ D-Box □ Pump □ Alarm □ H20Line □ Following are the specifications for the sewage disposal system on the above captioned property.	PWR Line
ype of system: 🗆 Conventional 🛛 Q Other <u>CHAMBER (QUICKY)</u> Septic Tank: <u>1000</u> gallons Pump Tank:	gallons
ubsurfaceNo. ofexact lengthwidth ofdepth ofDrainage Fieldditches $3$ feetditches $3$ feetditches	
rench Drain Required: Libert feet	IIICIIES
Authorized State Agent Date DateDate Date Date Date Date Date Date Date DateDateDateDate	