HTE# 10-5-248892

Harnett county Department of Public Hearth

DEDMIT	#	262	42
PERMIN	#	200	00

PERMIT # 26268	<u>Operation Permit</u> Z1//3
	Mew Installation Septic Tank Mitrification Line Repair Expansion
	PROPERTY LOCATION: MARKS RD
Name: (owner) BLACKWELL HOMES In	
System Installer: OTIS STRICKLAND	Registration #
Basement with plumbing: Garage Mumber of Bedroom:	3
Type of Water Supply: Community Public 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 S	tatutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
30° SEPTIC ENSEMENT	SE HZ SEPTIC EASEMENT
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule II. Monitoring: As required by Rule .1961.	.1961.
III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes \Box	
If yes, see attached sheet for additional operation:	ition conditions, maintenance and reporting.
V. Other: ALRON STILL TO BE COME	cree for
	100 100
□ D-Box □ Pump	
Following are the specifications for the sewage disposal system on the	
Type of system: Conventional Other Pump To Subsurface No. of exact lens	
	itch $\frac{70}{}$ feet ditches $\frac{3}{}$ feet ditches $\frac{24-36}{}$ inches
French Drain Required: Linea Reet	icet untiles leet untiles leet untiles
Authorized State Agent	Rens Date 11/17/10