HTE# 10-5-24999RQ Harnett County Department of Public Health
PERMIT # <u>26269</u> <u>Operation Permit</u> 21858
📈 New Installation 🔀 Septic Tank 📈 Nitrification Line 🗆 Repair 🗆 Expansio
PROPERTY LOCATION: NC2105 Name: (owner) GREY CONEN SUBDIVISION GNEN LOT # 54
System Installer: OT 16 STRICKLAND Registration #
Basement with plumbing: 🗆 Garage 🔀 Number of Bedrooms <u>3</u>
Type of Water Supply: Community X Public Well Distance from well 100 feet System Type: TTT STTTS
(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 Authorization.
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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:
V. Other: D-Box Pump Alarm H20Line PWR Li
Following are the specifications for the sewage disposal system on the above captioned property.
Type of system: ロ Conventional X Other <u>EZFいい</u> Septic Tank: <u>1000</u> gallons Pump Tank: gallon. Subsurface No. of exact length width of depth of
Drainage Field ditches <u>1</u> of each ditch <u>200</u> feet ditches <u>3</u> feet ditches <u>18-20</u> inches French Drain Required: <u>Linear feet</u>
Authorized State Agent NUM REHS Date 12 21 10