## Harnett County Department of Public Health

, 1		
PERMIT # 26373 Opera	tion Permit 21917	
New Install	ation 🖔 Septic Tank 🕱 Nitrification Line 🗆 Repair 🗀 Exp	nansior
PROPERTY	LOCATION: MARKS RD	pansion
Name: (owner) Wm Ker Pierce Inc SUBDIV	ISION ASHEFORD LOT # 14	9
	istration #	
Basement with plumbing:  Garage Mumber of Bedrooms 3		
Type of Water Supply:   Community Public   Well Distance from well	feet	
System Type:	Types V and VI Systems expire in 5 years.	
(In accordance with Table V a)  Owner must conta	ct 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 Tr	eatment and Disnosal and all conditions of the Improvement Permit and Construction Authorisation	
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	50'	
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195 /	/	
, 10 /	1 220	
	REPAIR 220	
	AREA !	
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	House I	
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200	CMOOD OR	
PERMIT CONDITIONS:		
Performance: System shall perform in accordance with Rule .1961.		
II. Monitoring: As required by Rule .1961.		
II. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes No		
If yes, see attached sheet for additional operation conditions, mainton.  V. Operation:	nance and reporting.	
. Other: Pump & ALARAM STILL TO BE C	HECKED	
□D-Box □Pump □	Alarm 🗆 H20Line 🗆 PW	VR Line
ollowing are the specifications for the sewage disposal system on the above captioned prop		IN LINE
ype of system:  Conventional Other Pump To CHAMBER (Q1	17)	allons
ubsurface No. of exact length	width of depth of	2110113
rainage Field ditches of each ditch of each ditch	the state of the s	S
rench Drain Required: Linear feet		
All Miles	. 1	
uthorized State Agent	Date 16/2-11	-