HTE#11-5-26166

## Harnett County Department of Public Health

PERMIT # <u>26487</u>	Operation Permit	21976
	New Installation M. Septic Tank M. Nitrification Line C. PROPERTY LOCATION: Docs Ro	☐ Repair ☐ Expansion
Name: (owner) Wynn Con		LOT #
` '	LUMBING Registration #	
Basement with plumbing: Garage X Num		
Type of Water Supply:   Community   Publ	ic $\square$ Well Distance from well $ u$ 00 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 permi	it 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 Co	onstruction Authorization.
	137'	
	181	
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	DOED,	
	35,466	
	38 x46'   150'	
	4123	
	Cara saw	
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PERMIT CONDITIONS:		
I. Performance: System shall perform in accor	dance with Rule .1961.	
II. Monitoring: As required by Rule . 1961.		
III. Maintenance: As required by Rule .1961. On	her:	
Subsurface system operator re	quired? Yes 🗆 No 🔀	
	additional operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
□ D-Box □	Pump □Alarm □H20Line □	PWR Line
Following are the specifications for the sewage disposa		
,, ,	Septic Tank: 1000 gallons Pump Tar	
Subsurface No. of	exact length width of depth of	
Drainage Field ditches	of each ditch <u>50</u> feet ditches <u>3</u> feet ditches	18-224 inches
French Drain Required:time	ear leet	
Authorized State Agent	PEHS Data (3/1)	