HTE#_11-5-27183R Harnett County Department of Public Health	
PERMIT # <u>26852</u> <u>Operation Permit</u> 227	81
🔀 New Installation 🖾 Septic Tank 🔀 Nitrification Line 🗆 Repair	\Box Expansion
PROPERTY LOCATION: MICROTONER RD	
()	<u>+ </u>
System Installer: <u>TEO DROWN</u> Basement with plumbing: Garage X Number of Bedrooms <u>3</u>	
Type of Water Supply: 🗆 Community 💢 Public 🗆 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	rization.
86'	
leer no l	
197 AREA 71 50	
HOUSE	
E	
DOUGLAS ACRES	
PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule .1961.	
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.	
IV. Operation:	-
V. Other:	-
□D-Box □Pump □Alarm □H20Line □	- PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.	· · · · Lill¢
Type of system: 🗆 Conventional 🛛 Other <u>CHAMBG2 (QHA</u>) Septic Tank: <u>1000</u> gallons Pump Tank:	gallons
SubsurfaceNo. ofexact lengthwidth ofdepth ofDrainage Fieldditches1of each ditch120feetditches3feetditches1feetfeetditches24-36	inches
French Drain Required:	110103
Authorized State Agent Date1 28 13	