| HTE# 12-5-2 | Harnett County Department of Public Health |
|---------------------------------------|---|
| PERMIT # _ 265 | <u>SNO</u> <u>Operation Permit</u> 22325 |
| | New Installation X Septic Tank X Nitrification Line \Box Repair \Box Expansion |
| | PROPERTY LOCATION Some LORDER (ST |
| Name: (owner) | HUGH SURLES BUILDERS SUBDIVISION WALNUT GROVE LOT # 24 |
| Basement with plumb | <u>OTIS STRICKLAND</u> Registration # |
| Type of Water Supply | r: \Box Community \nearrow Public \Box Well Distance from well $\underline{100}$ feet |
| System Type: (In accordance with T | |
| | |
| This system has been instal | lled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. |
| PERMIT CONDITIONS: | ERRICE NOLA OECC HOUSE RUSE SANGLASS CT |
| I. Performance: | System shall perform in accordance with Rule .1961. |
| II. Monitoring: III. Maintenance: | As required by Rule .1961. As required by Rule .1961. Other: |
| | Subsurface system operator required? Yes 🗆 No 🔀 |
| IV. Operation: | If yes, see attached sheet for additional operation conditions, maintenance and reporting. |
| • | |
| V. Other: | |
| Following are the specif | D-BoxPumpAlarmH20LinePWR Line |
| Type of system: 🔲 (| |
| Subsurface Drainage Field | No. of exact length width of depth of |
| French Drain Require | inches inches inches inches |
| Authorized State Age | ent Date 5/22/12 |