HTE# 12-5-29033

Harnett County Department of Public Health

PERMIT # 27073	Operation Permit	22519
	New Installation 😺 Septic Tank 🔀 Nitrification Line 🗆	Repair Expansion
	PROPERTY LOCATION: NCDO	
	NES SUBDIVISION GWEN OAKS	LOT # _\
System Installer: OTIS STRICKLAND	Registration #	
Basement with plumbing: ☐ Garage ☐ Number of Bedrooms Type of Water Supply: ☐ Community ← Public ☐ Well	Distance from well \OO 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 Sta	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Co	nstruction Authorization.
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	REPAIR	
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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:	No. M	
Subsurface system operator required? Yes \Box If yes, see attached sheet for additional opera		
IV. Operation:		
V. Other:		DIMD I :
	Alarm	PWR Lin
Following are the specifications for the sewage disposal system on the Type of system: Conventional Other	above captioned property. Septic Tank: 1000 gallons Pump Ta	nk· gallons
Subsurface No. of exact leng	th width of depth o	
	tch 240 feet ditches 3 feet ditches	12 inches
French Drain Required:		
Authorized State Arent	Rens Date 10/16/12	