HTE# 12-5-29137

Harnett County Department of Public Health

PERMIT # 276)63	Operation Permit	22450
		New Installation Septic Tank Nitrification	n Line 🗆 Repair 🗆 Expansion
		PROPERTY LOCATION: MARCE RO	•
Name: (owner)	ROBERT THOMAS HOL		LOT # <u>92</u>
System Installer: _	TEO BROWN	Registration #	
Basement with plumbi			
Type of Water Supply	Community 🔀 Public 🗆 W		
System Type:	1179	Types V and VI Systems expire in 5 years.	on for normit rangual
(In accordance with T	able V a)	Owner must contact Health Department 6 months prior to expiration	ni for permit renewal.
This system has been instal	led in compliance with applicable North Carolina Genera	I Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement	Permit and Construction Authorization.
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		House	
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		LOCKHOOD DIL	
DEBUT COUNTIONS			
PERMIT CONDITIONS: I. Performance:	System shall perform in accordance with I	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 o	peration conditions, maintenance and reporting.	
IV. Operation:			
V 045			***************************************
V. Other:			
			ine 🗆PWR Line
	cifications for the sewage disposal system on	the above captioned property.	L. D. D. T. L.
Type of system:			lons Pump Tank: gallons depth of
Subsurface	No. of exact	length width of ch ditch 150 feet ditches feet	ditches $\frac{24-36}{}$ inches
Drainage Field French Drain Require		in archi reer archies reer	uncolor Service Inches
Trench Drain nequire	THE THE REST		
		ou cho	20