HTE#<u>12-5-3006</u>2

Harnett County Department of Public Health

| PERMIT # 255 | Operation Permit | 22783 |
|---|--|-----------------------|
| | 🖂 New Installation 🖂 Septic Tank 💆 Nitrification Line 🗆 | Repair Expansion |
| N () | PROPERTY LOCATION: Docs Ro | |
| | WYNN CONSTRUCTION SUBDIVISION TROTTERS RIOGE | |
| • | THORTONS PLUMBING Registration # | |
| Basement with plumb Type of Water Supply | · · · · · · · · · · · · · · · · · · · | |
| System Type: | Types V and VI Systems expire in 5 years. | |
| (In accordance with T | | enewal. |
| This system has been instal | led in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Const | e and the |
| Tills system has been histar | ieu in Comphance with applicatie North Caronna General Statutes, Kules for sewage Freatment and Disposal, and an Conditions of the Improvement Permit and Const | uction Authorization. |
| | 140' | |
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| | 1000 | |
| | REPAIR | |
| | 1 ARGA 1 | |
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| | 1 150/ | |
| | 150' | |
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| | HOUSE | |
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| | KENTUCKY DERBY LN | |
| 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: | - |
| | Subsurface system operator required? Yes \(\sime\) No \(\sime\) If yes, see attached sheet for additional operation conditions, maintenance and reporting. | |
| IV. Operation: | | |
| · | | |
| V. Other: | | |
| | | PWR Line |
| | fications for the sewage disposal system on the above captioned property. | |
| Type of system: Subsurface | | |
| Drainage Field | No. of ditches exact length of each ditch feet ditches feet ditches depth of depth of ditches feet ditches | 30 ~ 18 inches |
| French Drain Required: | | mules |
| | | |
| Authorized State Ac | 100 100 100 100 100 100 100 100 100 100 | |