PERMIT	#	27520	
reknu	#		

Authorized State Agent_

Harnett County Department of Public Health HTE# 13-5-30410RC 23031 **Operation Permit** New Installation 🛛 Septic Tank 🗏 Nitrification Line 🗆 Repair 🗀 Expansion PROPERTY LOCATION: Docs & WYMM CONSTRUCTION SUBDIVISION TROTTERS RIGGE LOT # 73 Registration # Basement with plumbing: Garage Mumber of Bedrooms Type of Water Supply:

Community 🔀 Public 🗌 Well Distance from well 100 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 Authorization. 159 164 BLACK DIAMOND PERMIT CONDITIONS: 1. 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: ٧. Other: **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. Other Pump 1 0 FZ Fzon Type of system:

Conventional Septic Tank: 1000 ___ gallons Pump Tank: 🔟 🛇 🛇 🔿 Subsurface No. of exact length width of depth of of each ditch 240 Drainage Field ditches ditches ditches inches French Drain Required: Linear feet