HTE# 13-5-30421

Harnett County Department of Public Health

PERMIT # 27253	Operation Permit	22621
	New Installation 🗵 Septic Tank 🔀 Nitrification Line	
	PROPERTY LOCATION: NOTE:	
Name: (owner) WEAVER HOMES	SUBDIVISION TINGEN POINTE	LOT # <u>\\+</u>
System Installer: OTSIS STRICKLAND	Registration #	
Basement with plumbing: Garage Number of Bedrooms Type of Water Supply: Community Public Well	3 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 pe	rmit renewal.
This system has been installed in compliance with applicable North Carolina General Sta	atutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and	1 Construction Authorization.
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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:		
Subsurface system operator required? Yes 🖂 1		
If yes, see attached sheet for additional opera	tion conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
	□Alarm □H20Line □	PWR Line
Following are the specifications for the sewage disposal system on the Type of system: Conventional Other E > Fig. 19		T111
Subsurface No. of exact leng		
Drainage Field ditches of each di		es <u>36-18</u> inches
French Drain Required: Linear feet		
Authorized State Agent	1 Revis Date 3/7/13	