HTE# 13-5-31384

Harnett County Department of Public Health

Operation Permit

New Installation
Septic Tank
Nitrification Line
Repair
Expansion
PROPERTY LOCATION: 27 west 22941 PERMIT # <u>27477</u> LOT # <u>134</u> Name: (owner) Weaver Honer _ SUBDIVISION Tingen Pointe System Installer: Ott: Strickland

Basement with plumbing: Garage Number of _____ Registration # _____ Garage Number of Redrooms

Type of Water Supply:	☐ Community ☐ Public ☐ Well Distance from well feet
System Type:(In accordance with Ta	TIT G Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewal.
(in accordance with ra	owner must contact nearth bepartment o months prior to expiration for permit renewal.
This system has been installe	d in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
PERMIT CONDITIONS: I. Performance: II. Monitoring: III. Maintenance: IV. Operation:	System shall perform in accordance with Rule .1961. As required by Rule .1961. Other: Subsurface system operator required? Yes If yes, see attached sheet for additional operation conditions, maintenance and reporting.
V. Other:	
Following are the speci Type of system: Subsurface Drainage Field French Drain Required:	No. of exact length width of depth of ditches 3 feet ditches 3 feet ditches 3 inches
Authorized State Ag	rent Drya Missin LEHS Date 8/8/2013