HTE# 13-5-31945

Harnett County Department of Public Health

23021

PERMIT # 27607	PERMIT #	# 2	760	7
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Operation Permit

PENNII #	operation remit	
<i>\</i>	🛚 New Installation 🗷 Septic Tank 🗵 Nitrification Line 🗆 Repair 🗆	Expansion
\ 2	PROPERTY LOCATION: 27 WEST	
Name: (owner) <u>HEAVER</u> HOMES	SUBDIVISION TINGEN POINTE LOT #	210
System Installer: OTIS STRICKLAND	Registration #	
Basement with plumbing: Garage Number of Bedrooms	3 negistration #	
Type of Water Supply: Community Public Well	Distance from well 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.	
(m accordance min ruste v u)	, , , , , , , , , , , , , , , , , , ,	
This system has been installed in compliance with applicable North Carolina General Statu	ntes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorizati	on.
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	177'	
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	House	
	170034	
	Annual designation of the second seco	
	2	
	Omana DRIVE	
PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance with Rule . I	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		
IV. Operation:		
V. Other:		
D Doy D Dump 1	□ Alarm □ H20Line □	PWR Line
		rwk lile
Following are the specifications for the sewage disposal system on the a	above captioned property.	
	Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface No. of exact length	width of depth of	
	th 58 feet ditches 3 feet ditches 3	ınches
French Drain Required: Linear-feet		
Authorized State Agent	Date 10 2 13	
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