HTE# 13-5-32637200

Harnett County Department of Public Health

24527

PERMIT # 25710

Operation Permit

| New Installation 🖂 Septic Tank 💢 Nitrification Line 🗆 Repair 🗆 | Expansion |
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| PROPERTY LOCATION: Occo Ko | |
| Name: (owner) WYMN CONSMUCTION SUBDIVISION TROTIERS RIDGE LOT# | >8 |
| System Installer: THOCHO AS KINDS Registration # Basement with plumbing: Garage Number of Bedrooms | |
| 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. | |
| 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 | on. |
| De House | |
| ERMIT CONDITIONS: | |
| Performance: System shall perform in accordance with Rule .1961. | |
| Monitoring: As required by Rule .1961. Maintenance: As required by Rule .1961. Other: | |
| Subsurface system operator required? Yes \(\sigma \) No \(\sigma' \) | |
| If yes, see attached sheet for additional operation conditions, maintenance and reporting. | |
| /. Operation: | |
| Other: | |
| | PWR Line |
| ollowing are the specifications for the sewage disposal system on the above captioned property. | _ 1 1111 Emic |
| ype of system: Conventional Con | gallons |
| ubsurface No. of exact length width of depth of | — 8 |
| rainage Field ditches of each ditch 225 feet ditches 3 feet ditches 18 | inches |
| rench Drain Required Linear feet | |
| uthorized State Agent Date 3 2917 | |
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