HTE# 14-5-33079 R

Harnett County Department of Public Health

				ire ireater	23508
PERMIT # <u>27</u>	743	<u> </u>	peration Permit		
		✓ New	Installation 🗹 Septic Tank	✓ Nitrification Line	☐ Repair ☐ Expansion
	3 /	PRO	PERTY LOCATION:522215	AARNEH Certas	el KS
Name: (owner) _	BRC Hon	es INC	SUBDIVISION QUART 6	6N	LOT # <i>_29</i>
	JASON MARY	<u> </u>	_ Registration #		
Basement with plum	bing: Garage 🗷	Number of Bedrooms 3			
Type of Water Suppl		T Public 🗌 Well Distance fr Star Type III G 1820			
(In accordance with	Table V a)	Owner mus	t contact Health Department 6 mont	pire in 5 years. hs prior to expiration for per	rmit renewal
	•				
This system has been inst	talled in compliance with applica	ble North Carolina General Statutes, Rules for S	Sewage Treatment and Disposal, and all condi	ions of the Improvement Permit and	Construction Authorization.
	Janes Janes	18 Par 42			
PERMIT CONDITIONS:		1 Softe			
Performance:		accordance with Rule .1961.			
I. Monitoring: II. Maintenance:	As required by Rule .1 As required by Rule .1				
ii. Haintenance.		ator required? Yes 🗌 No 🗌			
		eet for additional operation conditions	, maintenance and reporting.		
V. Operation:					
. Other:					
]	D-Box	Pump □	Alarm 🗆	H20Line □	PWR Line
ollowing are the spec		disposal system on the above caption		112VLIII6 L	I WI LINE
ype of system:	Conventional 🗹 0	ther 25% (VED) VC(US)	Septic Tank: 🖊	OOD gallons Pump T	Tank: gallons
ubsurface	No. of	exact length	width of	depth	of
)rainage Field rench Drain Required	ditches	_ of each ditch 300 _ Linear feet	feet ditches	a feet ditches	s 24-20-Winches
renen Diani Negulicu		The second secon	4 .		
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