HTE# 14-5-33510

Harnett County Department of Public Health

23393

PERMIT # <u>28003</u>	Operation Permit	
		☐ Expansion
	PROPERTY LOCATION: Docs (S)	
Name: (owner) H+H CONSTON		# <u>37 </u>
System Installer: OTT'S STOLLER		
Basement with plumbing: ☐ Garage Number Type of Water Supply: ☐ Community Public	of Bedrooms Geet	
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 Court	rolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Auth	
This special has been instance in compliance that applicable north care	onia ochean statutes, noies in sewage treatment and bisposas, and an conditions of the improvement refinit and constitution Addi	orizacion.
PERMIT CONDITIONS:	REPAIR) ADUSE BISON LN	
I. Performance: System shall perform in accordancII. Monitoring: As required by Rule .1961.	ce with Rule .1961.	
II. Monitoring: As required by Rule .1961.III. Maintenance: As required by Rule .1961. Other:	·	
Subsurface system operator require	red? Yes 🗆 No 🔀	-
If yes, see attached sheet for addi	litional operation conditions, maintenance and reporting.	
		_ _
V. Other:	P	
□ D-Box □ Following are the specifications for the sewage disposal sys	Pump	PWR Line
Type of system: \Box Conventional \boxtimes Other $\underline{\sqsubseteq}$	Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface No. of	overt length	-
Drainage Field <u>ditches</u> Linear	of each ditch 200 feet ditches 18-26 feet ditches 3	inches
Linear Town Toyan Con Linear		
Authorized State Agent	Date 9/16/15	