HTE#<u>/4-5-34/0/</u>

## Harnett County Department of Public Health Operation Permit

23421

PERMIT # <u>&amp; /401</u>		<u>operation Peri</u>	<u>MIC</u>	
		New Installation	Septic Tank 🖊 Nitrification	Line 🗆 Repair 🗆 Expansion
		PROPERTY LOCATION:	Will Lucar Rd	
Name: (owner) At/a	ntic Construction		ectionte	LOT # 30
System Installer: How		Registration # _		
Basement with plumbing:	Garage   Number of Bedrooms			
Type of Water Supply:  Comm		Distance from well	foot	
System Type:	TTT-		VI Systems expire in 5 years.	
(In accordance with Table V a)	<del></del>		rtment 6 months prior to expiration	1 for parmit renewal
,		The state of the s	chience o months prior to expiration	for permit renewal.
This system has been installed in complian	ce with applicable North Carolina General St	atutes, Rules for Sewage Treatment and Dispo	sal, and all conditions of the Improvement P	Permit and Construction Authorization.
PERMIT CONDITIONS:	REPARENT A	Pain M	DRHAM St.	
I. Monitoring: As required II. Maintenance: As required Subsurface	perform in accordance with Rule     by Rule .1961.   by Rule .1961. Other:   system operator required? Yes A		porting	
V. Operation:	virous for additional operat	conditions, maintenance and rep	or ang.	
. Other:				
□ D-Box	□ Pump	□ Alarm □	☐ H20Line	Diam the
	-		IIZULIIIE	PWR Line
ype of system:   Conventional	the sewage disposal system on the Other E2 Flow	above captioned property.	ptic Tank: 1000 gallons	D T. I. "
ubsurface No. of	exact lengt		width of	Pump Tank: gallons
rainage Field ditches		n ch 200 feet	ditches 3 feet	depth of ditches 60-42 inches
rench Drain Required:	Linear feet	in <u>oc o o</u> leet	unches	utches <u>60-12</u> Inches
authorized State Agent	you Muain RE	· HS	Date/0/G/G	1 2 o f 4