HTE# 15-5.3530)

Harnett County Department of Public Health

23643

PERMIT # 2-8190

Operation Permit

I LIMIII TT		Operation	ii i Ciliii			
		New Installation	n 🗶 Septic Tan	nk 📈 Nitrification Li	ine 🗌 Repair 🔲	Expansion
		PROPERTY LO	CATION: PRANC	RIE ZN	•	
Name: (owner)	SOUTH SCAN INC	ใบเวเงเตสมว	1 12037605	BLUFFEFOXR	LAL LOT #	50
					<u>. 030</u> L01 # _	
System Installer: _		Kegistrai	tion #			
Basement with plumb						
• • • • • • • • • • • • • • • • • • • •	y: 🗆 Community 🔀 Public 🗀 Wel					
System Type:			pes V and VI Systems			
(In accordance with 1	Table V a)	Owner must contact He	alth Department 6 m	onths prior to expiration fo	r permit renewal.	
This system has been insta	alled in compliance with applicable Newth County County	Canada Bula (au Causa Taraba		Par California		
This system has been hista	alled in compliance with applicable North Carolina General		nt and Disposal, and all co	onditions of the improvement Perm	it and Construction Authorization	on.
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DEDMIT CONDITIONS						
PERMIT CONDITIONS:	forten shall and on the control of D. I.	10/1				
I. Performance:	System shall perform in accordance with Rule .1961.					
II. Monitoring:	nance: As required by Rule .1961. Other:					
III. Maintenance:						
	Subsurface system operator required? Yes					
	If yes, see attached sheet for additional oper	ation conditions, maintenance	ce and reporting.			
IV. Operation:						
V 04L	,		· · · · · · · · · · · · · · · · · · ·			
V. Other:						
	D-Box Pump		Alarm 🗆	H20Li ne [PWR Line
Following are the speci	ifications for the sewage disposal system on th	e above captioned property.				
	Conventional Other EZF	LOW		1000 gallons Pu	ımp Tank:	gallons
Subsurface	No. of exact len	gth	width of		depth of	— b ⁴¹¹⁰¹¹⁰
Drainage Field	ditches of each of	ditch 90 feet	ditches		· •	inches
French Drain Required:				1002	1000	matta
Analoguian I Corre	Mell Me	Prin		n. dish.		
Authorized State Ag	gent	o REHO		Date 5/15/15		