HTE# 15-53546)

## Harnett County Department of Public Health

23739

PERMIT # 22255

Operation Permit

PERMII #		_	<u>operation</u>	<u>i i eiiiit</u>			
		J	푁 New Installation	Septic Tan	k 💢 Nitrificati	ion Line 🗌 Repair	Expansion
	_		PROPERTY LOC	CATION: Wire	LUCAS R	-D	•
Name: (owner) [	ATLANTIC C	00050005	VOV ZIBDINIZION	SWEETHE	KEP-	101	# 31
System Installer: _		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ion #			"
Basement with plumbi		umber of Bedrooms _	negistrat	1011 #			
	,		Distance from well 1	OO feet			
System Type:				pes V and VI Systems	expire in 5 years.		
(In accordance with Ta			Owner must contact Hea			tion for permit renewal.	
,	,			•	•	•	
This system has been install	lled in compliance with applicable N	orth Carolina General Statut		t and Disposal, and all co	nditions of the Improveme	nt Permit and Construction Au	thorization.
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			RAINMAI	KED ST	MONEY CONTRACTOR OF THE PARTY O		
PERMIT CONDITIONS:				-612			
I. Performance:	System shall perform in ac	cordance with Rule 19	961				
II. Monitoring:	As required by Rule .1961.		,01.				
III. Maintenance:	As required by Rule .1961.	Other:	-				
	Subsurface system operator	required? Yes 🗆 No					
	If yes, see attached sheet	for additional operatio	n conditions, maintenand	ce and reporting.			
IV. Operation:	*	•					
•							
V. Other:							
	D-Box 🗆	Pump 🗆		Alarm 🗆	H20L	ine 🗆	PWR Line
Following are the speci	ifications for the sewage disp	osal system on the ab	ove captioned property.				
Type of system: 🗀	Conventional Other	EZ FLOY	<u>, ' ' ' '</u>		1000 gall	lons Pump Tank: —	gallons
Subsurface	No. of	exact length		width of	- G	depth of	
Drainage Field	ditches 1	of each ditch	300 feet	ditches	3 feet	ditches 45	inches
French Drain Required:		Linear feet					
		land					
Authorized State Ag	gent		REHS		Date 8/10	15	