

HTE# 15-5-35547

Harnett County Department of Public Health

23650

PERMIT # 28256

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: MCLEAN CHAPEL CHURCH RD

Name: (owner) DAVID SMITH SUBDIVISION _____ LOT # _____

System Installer: DICKERSON Registration # 1890

Basement with plumbing: Garage Number of Bedrooms 2

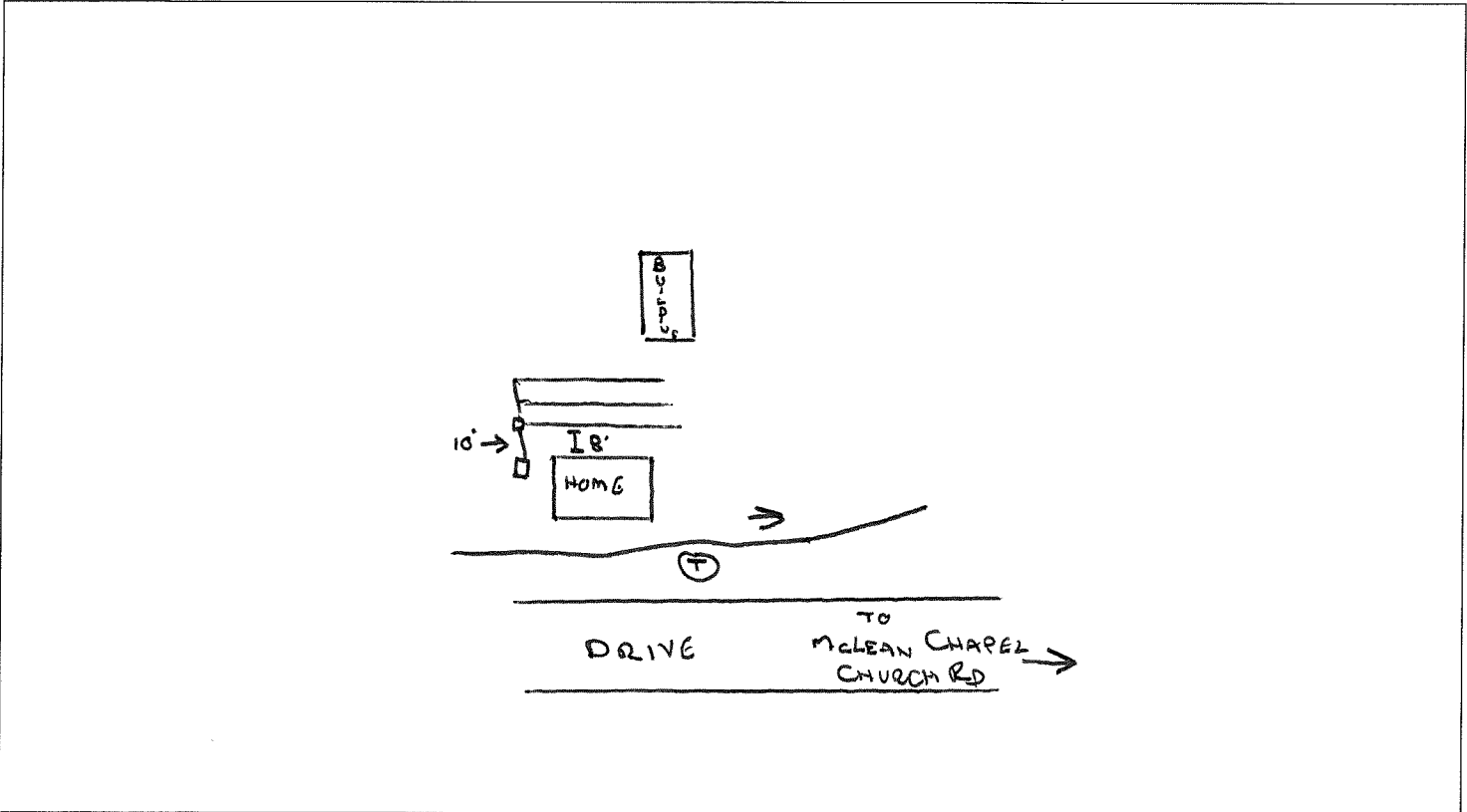
Type of Water Supply: Community Public Well Distance from well 100 feet⁺

System Type: III 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 Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.



PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with Rule .1961.

II. Monitoring: As required by Rule .1961.

III. Maintenance: As required by Rule .1961. Other: _____

Subsurface system operator required? Yes No

If yes, see attached sheet for additional operation conditions, maintenance and reporting.

IV. Operation: _____

V. Other: FRENCH DRAIN 36" DEEP

D-Box Pump Alarm H2O Line PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other CHAMBER (Q4) Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface No. of exact length width of depth of
Drainage Field ditches 3 of each ditch 50 feet ditches 3 feet ditches 18 inches

French Drain-Required: _____ Linear feet

Authorized State Agent

REGUS

Date

5/28/15