HTE# 15-5-36202R

Harnett County Department of Public Health

24609

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PERMIT # 4		Operation Permit		
	N N	w Installation Septic Tank	Nitrification Line 🗆 Repair 🗆 Expar	nsion
	7 "	PROPERTY LOCATION: LEE COL	NOV LINE RO	
Names (auman)	DONALO LONG		_	
		_ SUBDIVISION	ACCUSE AND	
System Installer: Julian Bulland Registration #				
Basement with plumbing: Garage Number of Bedrooms				
Type of Water Supply: Community Public Well Distance from well				
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.				
TO THE COURSE OF THE PARK OF T				
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.				
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PERMIT CONDITIONS:				
 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 cond	itions, maintenance and reporting.		
IV. Operation:				
V. Other:				
<u></u>				
	D-Box	Alarm 🗆	H20Line	/R Line
Following are the specifications for the sewage disposal system on the above captioned property.				
Type of system:			O ♂ gallons Pump Tank: ga	allons
Subsurface	No. of exact length	width of	depth of	
Drainage Field	ditches L of each ditch L	.00 feet ditches	feet ditches 23 inche	S
French Drain Required: Linear feet Linear feet				
Authorized State A	rent PGHS	n	ate 7/31/17	
Authorized State A	CIII.	U	alc / or / /	. 1