HTE#15-5-37290

Harnett County Department of Public Health

23996

PERMIT # 28620

Operation Permit

| X | New Installation Septic Tank Nitrification Line Repair | ☐ Expansion |
|--|--|-------------|
| Now (many Box C) | PROPERTY LOCATION: TINGERINES | u 50 |
| Name: (owner) BILL CLARK Homes | | # 56 |
| System Installer: MARTIC Source Source Source Survival Basement with plumbing: ☐ Garage ☑ Number of Bedrooms 3 | Registration # | |
| | stance from well 100 feet | |
| System Type: | Types V and VI Systems expire in 5 years. | |
| (In accordance with Table V a) | wner 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: 1. Performance: 1. Performance: 1. Nonitoring: 2. A required by Rule 1961. | | |
| II. Monitoring: As required by Rule .1961. | | |
| III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes No | π' | |
| If yes, see attached sheet for additional operation | conditions, maintenance and reporting. | |
| IV. Operation: | the reporting. | |
| V. Other: | | - |
| NOT STORY AND ADDRESS OF THE PROPERTY OF THE P | Alawa D H201: D | - DWD I |
| | Alarm H20Line H20Line | PWR Line |
| Following are the specifications for the sewage disposal system on the abov | e captioned property. Septic Tank: 1000 gallons Pump Tank: | gallons |
| Subsurface No. of exact length | width of depth of | |
| | 150 feet ditches 3 feet ditches 18-36 | inches |
| French Drain Required: Linear feet | | |
| Authorized State Agent | Date HIN 6 | |