HTE# 15-5-37535

Harnett County Department of Public Health

23991

PERMIT # 24625

Operation Permit

	New Installation A Septic Tank Nitrification Line	Repair Expansion
	PROPERTY LOCATION: ELGIN DZ	•
Name: (owner) MCKGE HOMES INC	SUBDIVISION OAKONT	LOT # _175
System Installer: EDOVE GARNER	Registration #	
Basement with plumbing: Garage Number of Bedrooms	4	
Type of Water Supply: Community Public Well	Distance from well \&\ \Colon \colon feet	
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 r	enewal.
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:	REPAIR !	
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:	Z	
Subsurface system operator required? Yes \Box N If yes, see attached sheet for additional operati	on conditions, maintanance, and reporting	
IV. Operation:	on conditions, maintenance and reporting.	
V. Other:		
□ D-Box □ Pump	□Alarm □ H20Line □	PWR Line
Following are the specifications for the sewage disposal system on the above, captioned property.		
Type of system: Conventional Other One Conventional	Septic Tank: 1000 gallons Pump Tank:	1000 gallons
Subsurface No. of exact length	width of depth of	167
Drainage Field ditches of each ditches French Drain Required:	h 300 feet ditches 3 feet ditches	inches
The state of the s		
Authorized State Agent	PCX Date 4)1))6	