HTE#16-538039 RR

## Harneit County Department of Publi ealth

24450

PERMIT # 28786

Operation Permit

	New Installation Septic Tank Nitrification Line  Repair	☐ Expansion
ν 6	PROPERTY LOCATION: Ross Ro	
Name: (owner) KIMBERLY GARONER		#_3
System Installer: Tommy Coley	Registration #	
Basement with plumbing: Garage Mumber of Bedrooms		
Type of Water Supply:   Community Public   Well	Distance from well 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 renewal.	
This system has been installed in compliance with applicable North Carolina General St	atutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Auth	orization.
PERMIT CONDITIONS:	HOUSE 36 12 17 R R R R R R R R R R R R R R R R R R R	
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. X	-
If yes, see attached sheet for additional open		
IV. Operation:	, ,	_
V. Other:		
□ D-Box □ Pump	□ Alarm □ H20Line □	PWR Line
Following are the specifications for the sewage disposal system on the	e above captioned property.	
Type of system:  Conventional  Other  Type of system:  Other		gallons
Subsurface No. of exact len	gth width of depth of	A :
Drainage Field ditches \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ditch $400$ feet ditches $3$ feet ditches $18-2^2$	inches
Tenen brain nequired.		
Authorized State Agent	86HS Date 22177	