| HTE#_ 16-5- | 39011 Harnett County Department of Public Health 24672 |
|--|--|
| PERMIT # 29 | 374 Operation Permit |
| Name: (owner) System Installer: _ Basement with plumbi | New Installation Septic Tank Initrification Line Repair Expansion PROPERTY LOCATION: 48 Avery Cond Dr. (Chalpheate Rd SR 14 Wyon Construction Inc. SUBDIVISION Avery Cond Dr. (Chalpheate Rd SR 14 LOT # 69 Ing: Garage Number of Bedrooms 3 Community Public Well Distance from well feet |
| System Type: | |
| (In accordance with T | Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal. |
| This system has been instal | lled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. |
| | TINSTURED W/ Pressure Manifold AZEL Pressure Hend AT MANIFOLD ALEA 13 362 510 11 12 13 13 14 15 15 16 17 18 18 18 18 18 18 18 18 18 |
| PERMIT CONDITIONS: I. Performance: | System shall perform in accordance with Rule .1961. |
| II. Monitoring: III. Maintenance: IV. Operation: | As required by Rule .1961. As required by Rule .1961. Other: Subsurface system operator required? Yes No If yes, see attached sheet for additional operation conditions, maintenance and reporting. |
| V. Other: | D.Dev. C |
| | D-Box Pump Alarm H20Line PWR Line PWR Line ifications for the sewage disposal system on the above captioned property. Conventional Other F103 Septic Tank: 1000 gallons Pump Tank: 1000 gal |

Authorized State Agent_

Linear feet

Drainage Field French Drain Required:

Date 09/12/2017