HTE# 16-5-39345Re Harnett County Department of Public Health 24369
PERMIT # 27/166 Operation Permit / 24309
New Installation Septic Tank M Nitrification Line Repair Expansion
Name: (owner) Warn Construction subdivision Avenuparto LOT # 10
System Installer: THO WITCHES Plumber of Bedrooms Begistration #
Type of Water Supply: 🗆 Community 🗹 Public 🔲 Well Distance from well feet
System Type: <u>25% Aculul Type Type Type</u> Types V and VI Systems expire in 5 years. (In accordance with Table V a) Owner m use co ntact 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.
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PERMIT CONDITIONS:
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:
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:
V. Other:
D-Box D-Box Pump Alorm H20Line PWR Line PWR Line Following are the specifications for the sewage disposal system on the above captioned property.
Type of system: Conventional Other 257202 Septic Tank: 1200 gallons Pump Tank: 1200 gallons
Subsurface No. of exact length width of depth of Drainage Field ditches 12 inches
French Drain Required: Linear feet
Authorized State Agent fore & Mahan Date 5-17-17