## Harnett County Department of Public Health

24548

PERMIT # 29103

Operation Permit

	Naw Installation & Contic Tank & NimiGration Line C	D
	New Installation Septic Tank Nitrification Line PROPERTY LOCATION: Rossa Pinnan Ros	Repair L Expansion
Name: (owner) WEAVER ILONG	PROPERTY LOCATION: ROSSAL PITMAN ROS	15
		LOT # <u>15</u>
System Installer: On 5 Stancel Basement with plumbing: Garage M Number	0	
Basement with plumbing: Garage Number Type of Water Supply: Community Public		
System Type:	Well Distance from well feet	
(In accordance with Table V a)	Types V and VI Systems expire in 5 years.  Owner must contact Health Department 6 months prior to expiration for permit r	anamal
(**************************************	owner must contact health bepartment o months prior to expiration for permit r	enewai.
This system has been installed in compliance with applicable North Ca	rolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Consti	ruction Authorization.
	COLEX SO READ R	
PERMIT CONDITIONS:  I. Performance: System shall perform in accordan	on wish Bule 10/1	
I. Performance: System shall perform in accordan II. Monitoring: As required by Rule .1961.	te with nure .1701.	
III. Maintenance: As required by Rule .1961. Other	ĭ	
Subsurface system operator requi	red? Yes 🗆 No 🔀	
	ditional operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
□ D-Box □	Pump □ Alarm □ H20Line □	PWR Line
Following are the specifications for the sewage disposal s		I WK LINE
Type of system:  Conventional Other E	Z Frow Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface No. of	exact length width of depth of	
Drainage Field ditches 3	of each ditch 100 feet ditches 3 feet ditches	inches
Drainage Field ditches French Drain Required: Linear	feet	
Authorized State Agent	26-15 Date 5/11/17	