HTE# 17-5-40675

## Harnett County Department of Public Health

24594

PERMIT # 29410

Operation Permit

	New Installation & Septic Tank & Nitrification Line  PROPERTY LOCATION: 338 Docs &	Repair 🗆 Expansion
N Comment		
Name: (owner) RONALD SMITH	SUBDIVISION	_LOT #I
System Installer: OTT 15 STRICKLONG		
Basement with plumbing: ☐ Garage ☐ Number of Bedi Type of Water Supply: ☐ Community ☐ Public ☐		
Type of Water Supply:  Community Public  System Type:	Well Distance from well feet 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 ren	lewar
,	eral Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construc	
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	TO DOGS	
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:		
Subsurface system operator required? Yes	LI NO XI	
IV. Operation:	operation conditions, maintenance and reporting.	
		<u></u>
V. Other:		
□ D-Box □ Pui	np 🗆 Alarm 🗆 H20Line 🗆	PWR Line
Following are the specifications for the sewage disposal system or		
Type of system: ☐ Conventional 🕱 Other <u>F</u> Z ₹		gallons
Subsurface No. of exact		
	length width of depth of ch ditch 3 feet ditches 7	5 inches
Drainage Field ditches of ea French Drain Required Linear feet		200000000000000000000000000000000000000
	1 A	
Authorized State Agent	Date 6 28 17	
0 - 7 - 7	A Date Olavala	

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