

HTE# 17-541170

# Harnett County Department of Public Health

25239

PERMIT # 29508

## Operation Permit

New Installation  Septic Tank  Nitrification Line  Repair  Expansion

PROPERTY LOCATION: FOLLY CT

Name: (owner) INTECON INC SUBDIVISION SWEETWATER LOT # 56

System Installer: JONES SEPTIC SERVICE Registration # \_\_\_\_\_

Basement with plumbing:  Garage  Number of Bedrooms 4

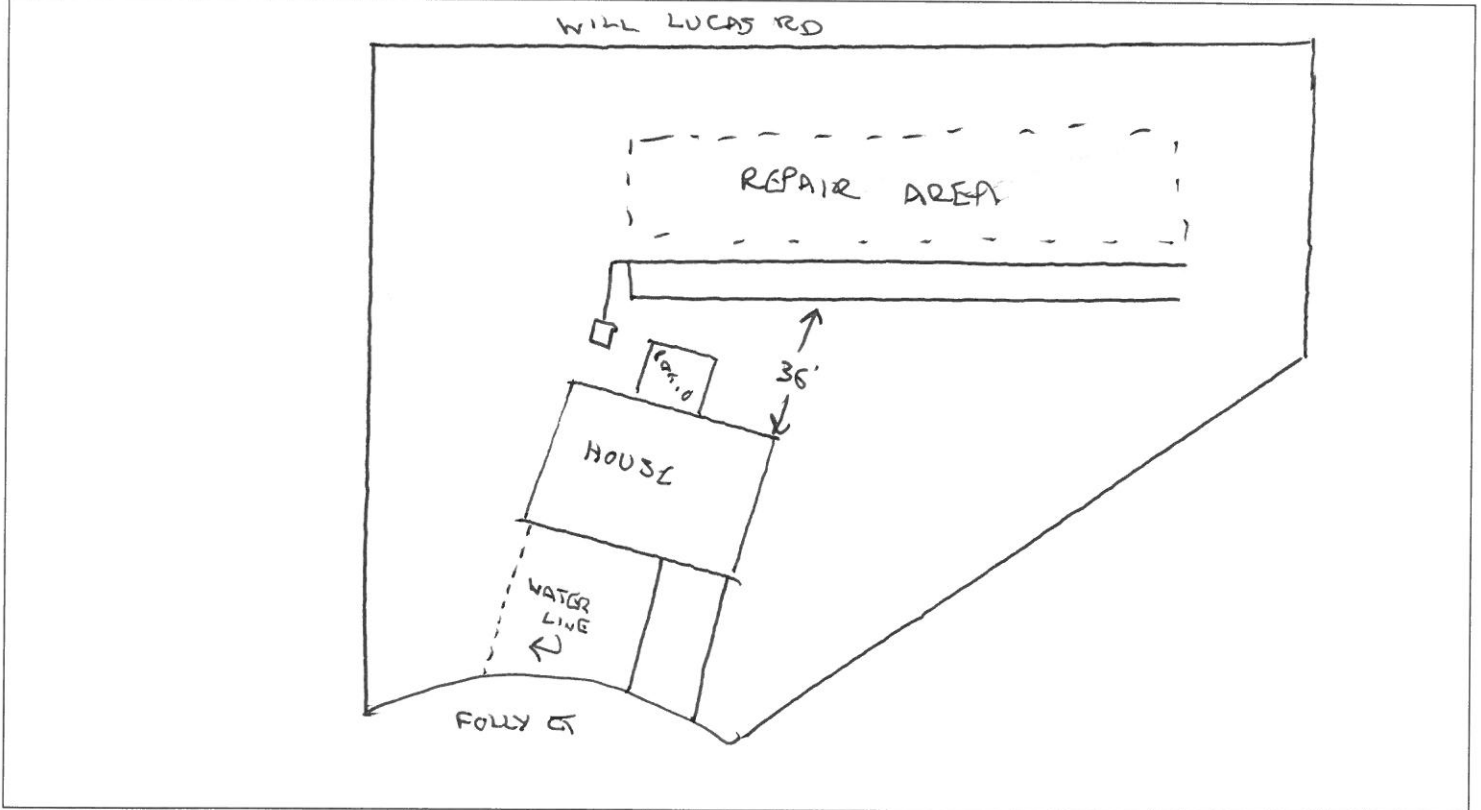
Type of Water Supply:  Community  Public  Well Distance from well \_\_\_\_\_ feet

System Type: IIIg 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 Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.



### 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  No   
If yes, see attached sheet for additional operation conditions, maintenance and reporting.

IV. Operation: \_\_\_\_\_  
 \_\_\_\_\_  
 V. Other: \_\_\_\_\_  
 \_\_\_\_\_

D-Box  Pump  Alarm  H2O Line  PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system:  Conventional  Other Chamber (Quick 4E) Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons  
 Subsurface Drainage Field No. of ditches 1 exact length of each ditch 240 feet width of ditches 3 feet depth of ditches 36-42 inches  
 French Drain Required: \_\_\_\_\_ Linear feet

Authorized State Agent [Signature] REWS Date 10/30/18