HTE#_ 17-5-41491

Harnett County Department of Public Health

24147

PERMIT # 39343

Operation Permit

		New Installation Septic Ta	nk 🗔 Nitrification Line 🗆 Repair	r 🗆 Expansion
		PROPERTY LOCATION: A	very Port Dr. (chaly been 101	sens. Sul
Name: (owner) _ \wodge_{JO}	a Construction	Inc. SUBDIVISION - Aven	Pore LOT	# 43
System mistaller / Wor	LOUD LIGHOU	Kegistration #		
Basement with plumbing:	Garage Number of Bedrooms	4		
Type of Water Supply: Commi	unity Public Well	Distance from well feet		
System Type: 35%	reduction 5/3			
(In accordance with Table V a)	•	Owner must contact Health Department 6 n	nonths prior to expiration for permit renewal.	
This system has been installed in compliance	e with applicable North Carolina General St	tutes, Rules for Sewage Treatment and Disposal, and all c	onditions of the Improvement Permit and Construction Au	thorization.
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DEDMIT CONDITIONS	4	AVERY PON		
PERMIT CONDITIONS: I. Performance: System shall		10/1		
The state of the s	perform in accordance with Rule . by Rule .1961.	1961.		
0 1	by Rule .1961. Other:		×	
AND THE RESERVE THE PROPERTY OF THE PROPERTY O	ystem operator required? Yes 🗌 N			_
		on conditions, maintenance and reporting.		
IV. Operation:	tactica street for additional operat	on conditions, maintenance and reporting.		
V. Other:				_
D-Box	□ Pump	□ Alarm □	H20Line □	PWR Line
Following are the specifications for t	he sewage disposal system on the a	bove captioned property.	-	provide programme and the second
Type of system: Conventional	1 Other EZ		1256 gallons Pump Tank:	gallons
Subsurface No. of	exact length	width of	depth of	6anons
Drainage Field ditches	3 of each dite	h 130 feet ditches _		inches
rench Drain Required:	Linear feet			- consensation de la consensatio
0.000				
Authorized State Agent	Tomb	THE NEAD	Date 03/01/2018	
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