Harnett County Department of Public Health

24737

PERMIT # 2961	Operation Permit	
	New Installation Septic Tank N	itrification Line 🗌 Repair 🗌 Expansion
	PROPERTY LOCATION: WILL LUCA	
Name: (owner) ATLANTIC CONST.)		
System Installer: HARROLA SERVICE	Registration #	•
Basement with plumbing: Garage Mumber of Be		
	Well Distance from well feet	
Type of Water Supply: Community Public System Type:	Types V and VI Systems expire in 5	years.
(In accordance with Table V a)	Owner must contact Health Department 6 months prior	
(III accordance with Table 7 a)		
This system has been installed in compliance with applicable North Carolina G	neral Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the	Improvement Permit and Construction Authorization.
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	RAINMAKER 5.	
	RAININA CAL ST.	
PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance w	th Rule .1961.	
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required?	es 🗆 No 🗶	
If yes, see attached sheet for addition	al operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
□ D-Box □	Pump 🗆 Alarm 🗆	H20Line D PWR Line
Following are the specifications for the sewage disposal system	on the above captioned property.	
Type of system: Conventional Other EZ	FLIW Septic Tank: 1000	gallons Pump Tank: gallons
Subsurface No. of	eact length width of	depth of
Drainage Field ditches o	each ditch 240 feet ditches 3	feet ditches 60 inches
French Drain Required: Linear fee		
		al alm
Authorized State Agent	Date Date	9/19/17
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