HTE# 17-5-42990

Harnett County Department of Public Health

24924

Authorized State Agent_

Operation Permit PERMIT # _ 29789 New Installation Septic Tank Nitrification Line Repair Expansion PROPERTY LOCATION: 3462 NC 550 Name: (owner) _ (osea SUBDIVISION LOT # _ @ System Installer: Registration # Basement with plumbing: Garage Number of Bedrooms Public Type of Water Supply:

Community ☐ Well Distance from well ___ System Type: ____ マラグ System Itty 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. * Water Line is Proposed La lost sptic/water inc Setvack required 25 25% NEDUCTION ANEA NC 55 W PERMIT CONDITIONS: System shall perform in accordance with Rule .1961. 1. Performance: 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: ٧. Other: D-Box Pump Alarm H20Line □ **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. Type of system:

Conventional Other EZ Flow Septic Tank: gallons Pump Tank: Subsurface exact length width of depth of of each ditch _ G Drainage Field ditches ditches French Drain Required: Linear feet

Date

