24998

Harnett County Department of Public Health

PERMIT # _ 49895	Uperation Permit
*	New Installation Septic Tank Nitrification Line Repair Expansion
	PROPERTY LOCATION: 35 Clarendon Ct. (old Stage N. N. S.L. 100
Name: (owner) _ Comfort Homes Inc.	
System Installer: 255501 Philips	Registration #
Basement with plumbing: Garage Number of Bedrooms	3 Registration #
Type of Water Supply:   Community Public   Well	Distance from well feet
System Type: 25% reduction Sys III	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.
( 4555 4565 1455 7 4)	owner mass contact nearth beganness o months provide expiration for permit reservation
This system has been installed in compliance with applicable North Carolina General Sta	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
	25% REDUCTIONS REPAIR AREA  OU CHAMBER  181  181  181  332 SETS  PLAN  P
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 N	do M
If yes, see attached sheet for additional operat	
IV. Operation:	non continues, maintenance and reporting.
V. Other:	
□ D-Box □ Pump	□ Alarm □ H20Line □ PWR Line
Following are the specifications for the sewage disposal system on the Type of system:   Conventional Other 04 Charm	above captioned property.
Type of system: Conventional Other 04 Chan Subsurface No. of exact length	0 1 0
Drainage Field ditches 3 of each dit	th width of depth of tch 78 feet ditches 3 feet ditches 20 inches
French Drain Required: Linear feet	. reet untiles
Authorized State Agent	Date 07/12/2018
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