HTE# 18-5-43369

Harnett County Department of Public Health

Operation Permit

TENNII #	operation rei	IIIIL		
	New Installation	Septic Tank 📮	Nitrification Line Repa	ir Expansion
	PROPERTY LOCATION:	40 Hom	land Dr. Chas Re	1, 50 1116
Name: (owner) H&H Construction,	FOC. CURDIVICION	62-1/620	L 512 10	T # 29/7
Same (owner) 1211 wind with		Cakmon	15 0/10	11 # 017
System Installer: Yellow Day Grading			-	
Basement with plumbing: Garage Number of Bedroo				
	/ell Distance from well _ ~~	feet		
System Type: 25% nedation	Sys. Types V and	d VI Systems expire	in 5 years.	
(In accordance with Table V a)	Owner must contact Health Depa	artment 6 months p	rior to expiration for permit renewal	l.
This system has been installed in compliance with applicable North Carolina General	al Statutes, Rules for Sewage Treatment and Disp	osal, and all conditions	of the Improvement Permit and Construction I	Authorization.
	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	//] *	SYS. COVERED PRI INSPECTION, DONE W/ UNCOUN	INSP.
	25% (125) CTC. 125 CT	1	END PORTION	>5
	P			
	D/w			
4				
PERMIT CONDITIONS:	PELAND DRIL	IE		
I. Performance: System shall perform in accordance with I	Rule .1961.			
II. Monitoring: As required by Rule .1961.				
III. Maintenance: As required by Rule .1961. Other:				
Subsurface system operator required? Yes				
If yes, see attached sheet for additional o	peration conditions, maintenance and i	reporting.		
IV. Operation:				
V. Other:				
□ D-Box □ Pun	np □ Alarm		H20Line □	PWR Line
Following are the specifications for the sewage disposal system on	institution of the state of the			i iii ciiio
	36 Chamber 1119	Centic Tanks	vallens Dumn Tanks	gallans
	length	width of	depth of	gallolis
Drainage Field ditches of each	ch ditch _ 2 👀 _ feet	ditches	3 feet ditches 24-	₱18 inches
French Drain Required: Linear feet	in until O O leet	arcues	leet ditches	F C IIICIES
Trenen Statil Required Lillear feet	2			
Authorized State Agent	Will tel	15 Dai	e 08/17/2018	