25129

Harnett County Department of Public Health

| PERMIT # 29931 | | <u>Operation</u> | / | _ | |
|---|--|--|---|---|---------------|
| | | | Septic Tank Nitr | rification Line L Repair | Expansion |
| Names (2000) 5 | TOUCHEN BIN | PROPERTY LOC | ATION: Huy 401 N | LOT # | + 7 |
| System Installer: | | SUBDIVISION | ion # | LUI H | |
| Basement with plumbin | | | | | |
| Type of Water Supply: | ☐ Community ☐ Public | ☐ Well Distance from well | | | |
| System Type: 25 | | e Type VII G BZ TY | pes V and VI Systems expire in 5 y | ears. | |
| (In accordance with Ta | ble V a) | Owner must tomas Hea | alth Department 6 months prior to | expiration for permit renewal. | |
| This system has been installe | d in compliance with applicable North Carolin | na General Statutes, Rules for Sewage Treatmen | at and Disposal, and all conditions of the In | nprovement Permit and Construction Author | rization. |
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| | | Barr 27' | 7 | | |
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| | K31 | 6.1 MB | 571 | | |
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| | | MORCAN FARY | s DREVE | | |
| PERMIT CONDITIONS: | | | | | |
| Performance: Monitoring: | System shall perform in accordance As required by Rule .1961. | with Kule .1961. | | | |
| III. Maintenance: | | | | | |
| | Subsurface system operator require | d? Yes □ No □ | | | |
| IV. Operation: | If yes, see attached sheet for addit | tional operation conditions, maintenar | nce and reporting. | | |
| iv. Operation. | | | | | |
| V. Other: | | | | | _ |
| | D-Box | Pump 🗆 | _Alarm 🗆 | H20Line \square | PWR Line |
| • | | tem on the above captioned property | | | |
| Type of system: Subsurface | No. of | exact length | Septic Tank: | 1 1 (| gallons |
| Drainage Field | ditches3 | of each ditch feet | | feet ditches | inches |
| French Drain Required: | New York Control of the Control of t | | • | | |
| | | Mal As | 2 | 0 01 10 | |
| Authorized State A | ent as | 1 Aruan | Date | 7-26-18 | |