HTE# 18-5-43950

## Harnett County Department of Public Health

No. 26028

PERMIT # 30102

Operation Permit

	New Installation 🖂 Septic Tank 🔀 Nitrification Line 🗆 Rep	oair 🗌 Expansion
0 (	PROPERTY LOCATION: 70 SLATE DZ	
Name: (owner) BEN STOUT		.0T # <u>\\)</u>
System Installer: YELLOW DOG	Registration #	
Basement with plumbing:  Garage Number of Bedrooms		
Type of Water Supply:   Community Public   Well	30. 30-00 to 1 00 00 00 00 00 00 00 00 00 00 00 00 0	
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 to expiration for permit renew	al.
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.		
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REPAIR  REPAIR  OUT  PRAINAGE  PITCH		
PERMIT CONDITIONS:	IMI	
<ol> <li>Performance: System shall perform in accordance with Rule</li> <li>Monitoring: As required by Rule .1961.</li> </ol>	.1701.	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes \(\sigma\)	No 🔀	
If yes, see attached sheet for additional operation		
IV. Operation:		
V. Other:		
□ D-Box □ Pump	o 🗆 Alarm 🗆 H20Line 🗀	PWR Line
Following are the specifications for the sewage disposal system on the		
Type of system:   Conventional Other Change	Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface No. of exact length	gth width of depth of	
Drainage Field ditches of each dit	itch <u>221</u> feet ditches <u>3</u> feet ditches <u>18</u>	inches
French Drain Required Linear feet		
Authorized State Agent	Date 2)8/19	
4		