Harnett County Department of Public Health

25183

PERMIT #	Uperation Permit	
	New Installation Septic Tank Institution Line Repair Es	xpansion
	PROPERTY LOCATION: 1635 Harrington Rd. (SR 12.	501
Name: (owner) Steve Thomas	SUBDIVISION LOT #	
	Registration #	
Basement with plumbing: ☐ Garage ☐ Number of Bedrooms Type of Water Supply: ☐ Community ☐ Public ☐ Well		
System Type: 25% reduction sys. I		
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for permit renewal.	
(in accordance with rapid y a)	owner must contact readin bepartment o 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.		
	25% REDUCTION REPAIR 38.0 5=9 10 17 38.0 5=9	
PERMIT CONDITIONS:		
 Performance: System shall perform in accordance with Rule . Monitoring: As required by Rule .1961. 	1701.	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes \(\sigma\) N	0 H	
If yes, see attached sheet for additional operati		
IV. Operation:		
V. Other:		
□ D-Box □ Pump		PWR Line
Following are the specifications for the sewage disposal system on the a		
Type of system: Conventional Other Ez Flo		_ gallons
Subsurface No. of exact length Drainage Field ditches of each ditches		
Drainage Field ditches of each ditches Linear feet	ch 100 feet ditches 3 feet ditches 34 in	iches
Trends Drain required Lilical rect		
Authorized State Agent	1845 Date 08 30 12018	
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18-5-44218 1635 Harrington nd. (Sr. 1230) Steve Thomas 08/30/30