

HTE# 09-5-22699

Harnett County Department of Public Health

20870

PERMIT # 25643

Operation Permit

New Installation Septic Tank Repair Nitrification Line Expansion

PROPERTY LOCATION: DANIELS CREEK RD

Name: (owner) SHELBY R. SMITH SUBDIVISION _____ LOT # _____

System Installer: WESLEY GERALD PALMER Registration # 1944

Basement with plumbing: Garage Number of Bedrooms BARN/SHOP (100sqft)

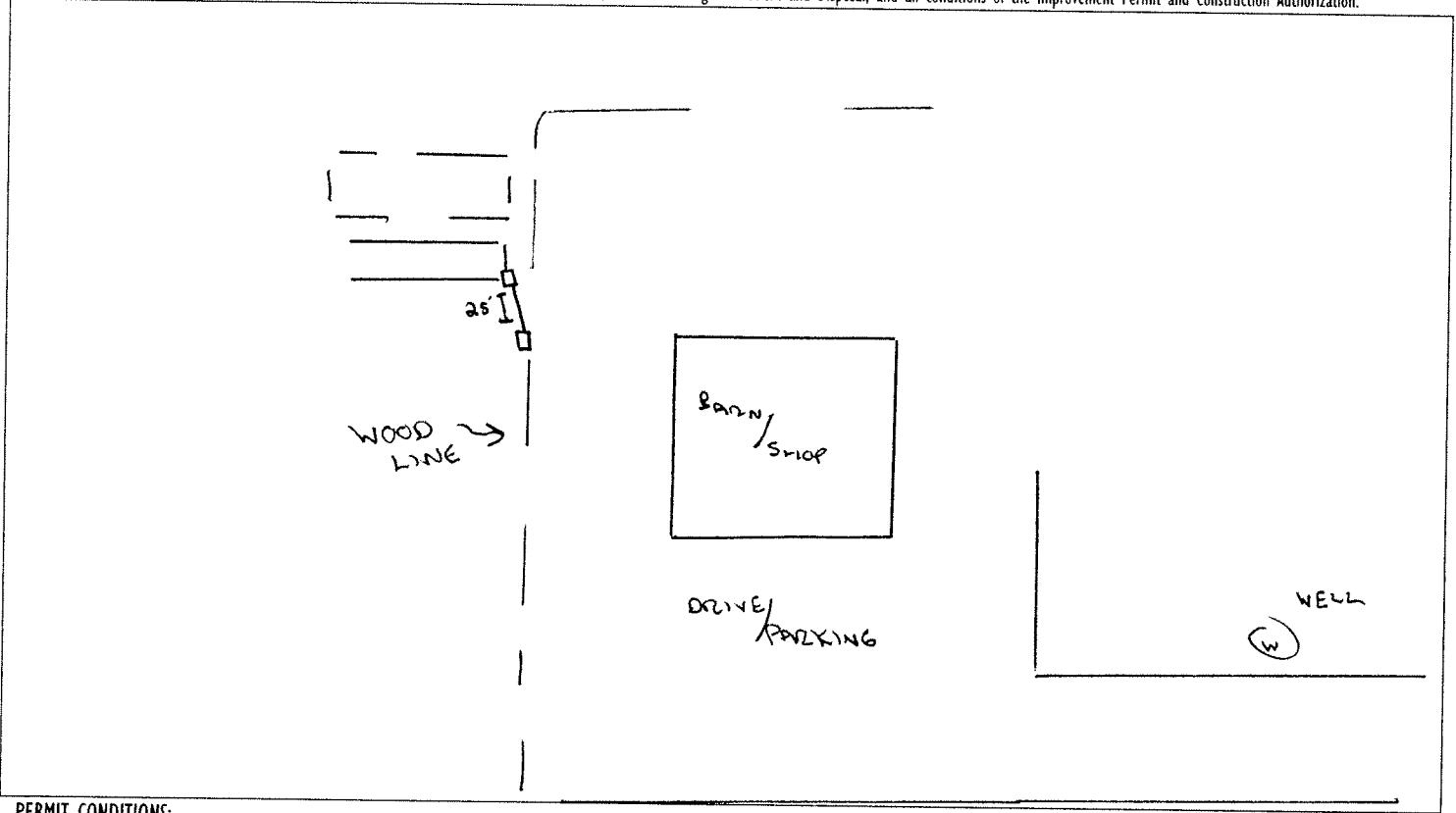
Type of Water Supply: Community Public Well Distance from well 100 feet*

System Type: IID 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.

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.



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 No
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other _____

Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field: No. of ditches 2 exact length of each ditch 50 feet width of ditches 3 feet depth of ditches 18 inches

French Drain Required: _____ Linear feet

Authorized State Agent REMS Date 4/22/10