HTE# EH 2002-0018 Harnett County Department of Public Health

No. 26077

PERMIT #		<u>Operat</u>	tion Permit		
		☐ New Installa	ation 🛭 Septic Tank 🗵	Nitrification Line Repair	☐ Expansion
N (nem cr. e		LOCATION: 304 Cov		# 1314)
Name: (owner){ System Installer: _	VELLONIT	SCOTT KOGENS SUBDIVI	SIONstration #	LOT #	
Basement with plumb		Number of Bedrooms	tration #		
Type of Water Supply	Community	Nell Distance from well	feet		
System Type:(In accordance with T			Types V and VI Systems expire in	or to expiration for permit renewal.	
(in accordance with t	abic 1 aj	Owner must contac	t hearth bepartment o months pric	or to expiration for permit renewal.	
This system has been instal	led in compliance with appli	cable North Carolina General Statutes, Rules for Sewage Tre	atment and Disposal, and all conditions of	the Improvement Permit and Construction Author	ization.
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DEDUIT COMPUTATIONS		A =			
PERMIT CONDITIONS: I. Performance:	System shall perform	in accordance with Rule .1961.	thy Ra	*	
II. Monitoring:	As required by Rule .	.1961.			
III. Maintenance:	As required by Rule .	.1961. Other:erator required? Yes 🗆 No 🗆			
		erator required: Tes 🗀 No 🗀 Sheet for additional operation conditions, mainte	enance and reporting.		
IV. Operation:	***************************************	anne manne de la company de			য
V. Other:		48.00			•0
	D-Box №	Pump □	Alarm 🗆	H20Line □	PWR Line
Following are the speci		e disposal system on the above captioned prop	erty.		
Type of system:	Conventional 🛎	Other III b QUICK 44	Septic Tank: 100C		gallons
Subsurface Drainage Field	No. of ditches	exact length of each ditch 200	width of ditches 3	depth offeet ditches _18-24	1_ inches
French Drain Required:		Linear feet	uttiles	icet uitules 10	I mones
	2	hal		-1.1	7,
Authorized State Ag	ent Defi	LIL PEHS F	Date	3/11/2020	