HTE# WEH 2009-0012

Harnett County Department of Public Health

No. 26458

PERMIT # NA

Operation Permit

☐ New Installation ☐ Septic Tank ☒ Nitrification Line ☒ Repair ☐ Expansion

PROPERTY LOCATION: 1930 GUY ROAD (SR 1544)

Name: (owner) TIMOTHY & LILLIE TAYLOR SUBDIVISION GLEN ACRES LOT # STR

System Installer: JUNIOR CLENDENIN Registration # _____

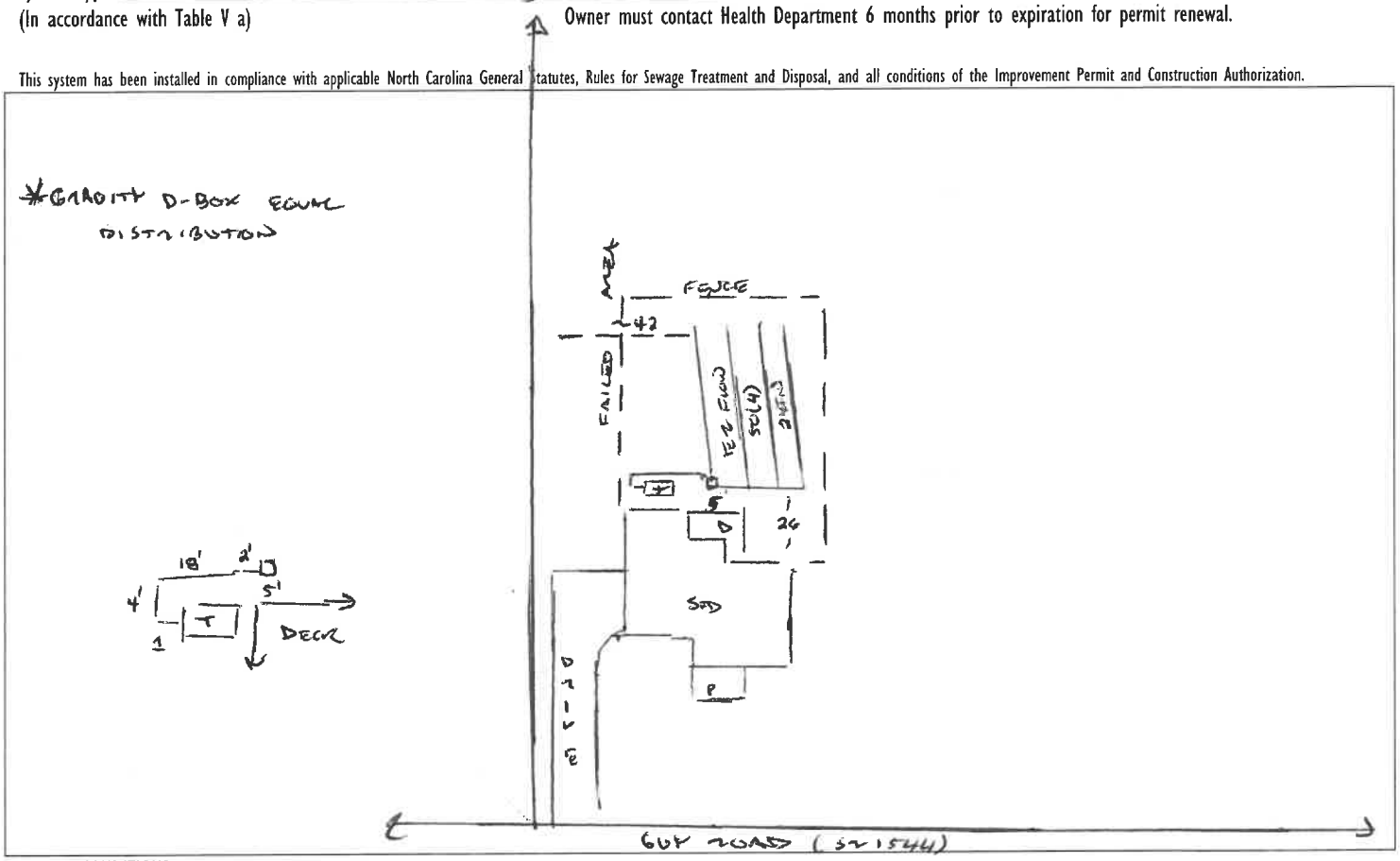
Basement with plumbing: ☐ Garage ☒ Number of Bedrooms 3

Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well NA feet

System Type: 25% REDUCTION STS - III g 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: _____

☐ _____ D-Box ☐ _____ Pump ☐ _____ Alarm ☐ _____ H2OLine ☐ _____ PWR Line

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

Type of system: ☐ Conventional ☒ Other EZ Flow III g Septic Tank: EXT [1000] gallons Pump Tank: _____ gallons

Subsurface Drainage Field: No. of ditches 4 exact length of each ditch 50 feet width of ditches 3 feet depth of ditches 24 inches

French Drain Required: _____ Linear feet

Authorized State Agent _____ Date 01/21/2021