Harnett County Department of Public Health

PERMIT # EH 2203-0018 **Operation Permit** ☐ New Installation ☐ Septic Tank ☒ Nitrification Line ☐ Repair ☒ Expansion PROPERTY LOCATION: 710 GAKRIDGZ RIVER SOS (51/4/8) POWELL NURSEN Name: (owner) _ nicky TEMPLE SUBDIVISION System Installer: ADCOCK ESCALATING EXT MIGNANT HOUSING Garage

Number of Bedrooms Basement with plumbing: 4806PD MAX Type of Water Supply:

Community Public Well Distance from well feet 240 REDUCTIONS GUSTEM Types V and VI Systems expire in 5 years. Owner must contact Health Department months prior to expiration for permit renewal. (In accordance with Table V a) 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% TEDSCTUD D * NEW 150FT NBONE 2 * NEW 75TT BELOW * LAST POFT BOTTOM CINE ABANDINESS DUE TO DAMNGE AGICULTURAL From DONS THER * LINE I DIEZER POUR PAD NULSERY TO FALL NED. EXT ANEX. T BLDG DWHH PAD PERMIT CONDITIONS: * GRAVITY TO D-BOX ELLIL DISTRIBUTION System shall perform in accordance with Rule . 1961. ١. Performance: * EXPLASION TO ALLOW ADDITIONAL OCCUPATES As required by Rule . 1961. Monitoring: II. As required by Rule .1961. Other: _ III. Maintenance: * EXT MIGRANT HOUSING Subsurface system operator required? Yes
No
M If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: H20Line Alarm D-Box Pump Following are the specifications for the sewage disposal system on the above captioned property. Septic Tank: 1000 gallons Pump Tank: Type of system:

Conventional & Other Et FLOW IIIn [SEW A width of depth of Subsurface No. of exact length 150 feet ditches of each ditch Drainage Field French Drain Required: Date Authorized State Agent_