

HTE# REPAIR  
PERMIT # 26037

# Harnett County Department of Public Health

21439

## Operation Permit

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

PROPERTY LOCATION: 1415 N. Main St. Lillington

Name: (owner) MICHAEL KIM

SUBDIVISION \_\_\_\_\_

LOT # \_\_\_\_\_

System Installer: TERRY MAPLES

Registration # \_\_\_\_\_

Basement with plumbing: ☐ Garage ☐ Number of Bedrooms \_\_\_\_\_

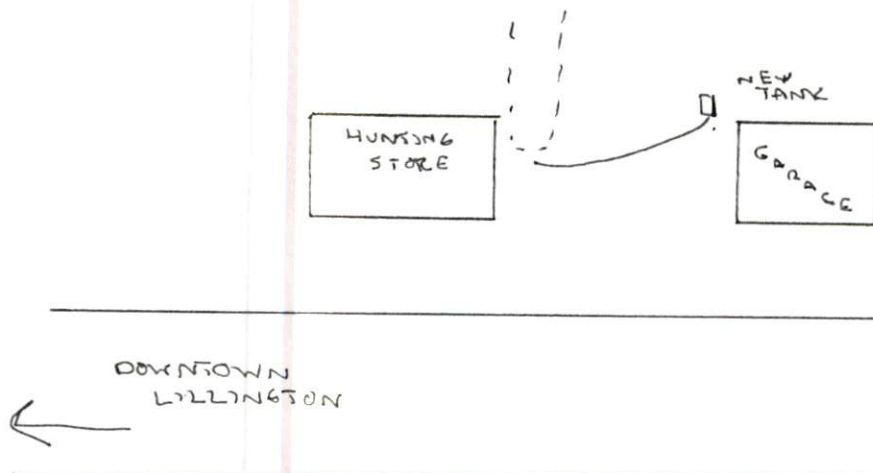
Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well 100 feet

System Type: \_\_\_\_\_ 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 \_\_\_\_\_

Subsurface No. of exact length  
Drainage Field ditches of each ditch \_\_\_\_\_ feet

French Drain Required: \_\_\_\_\_ Linear feet

Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

width of depth of  
ditches \_\_\_\_\_ feet ditches \_\_\_\_\_ inches

Authorized State Agent \_\_\_\_\_

RENS

Date 5/7/10