

HTE# 10-5-24079

# Harnett County Department of Public Health

21062

PERMIT # 25734

## Operation Permit

New Installation  Septic Tank  Repair  Nitrification Line  Expansion

Name: (owner) Barbara Wilson

PROPERTY LOCATION: 5A1418 REWARD

System Installer: JASON MATTHEWS

SUBDIVISION Regal Crest

LOT # 11

Basement with plumbing:  Garage  Number of Bedrooms 4

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

Type of Water Supply:  Community  Public  Well Distance from well \_\_\_\_\_ feet

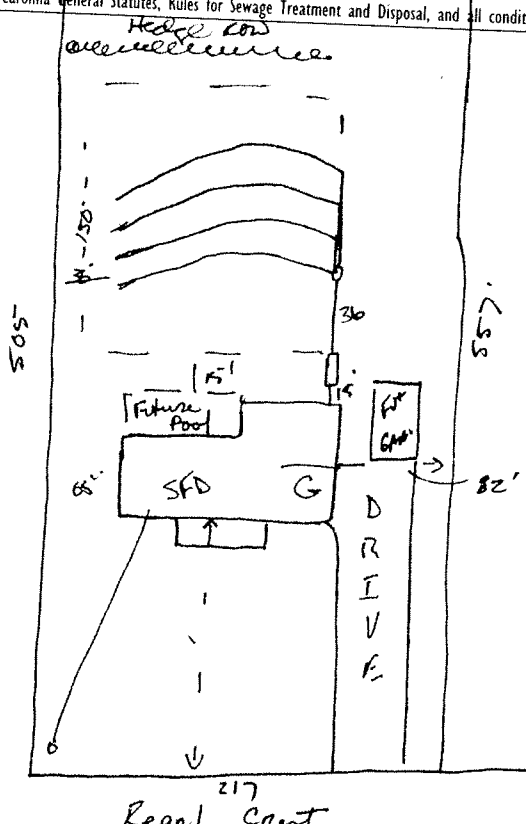
System Type: 25% REDUCTION SYSTEM TYPE III & IV Types V and VI Systems expire in 5 years.

(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.

*X* System installed as permitted.



### 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 25% REDUCTION

Subsurface Septic Tank: 1200 gallons Pump Tank: \_\_\_\_\_ gallons

Drainage Field No. of exact length of each ditch 4 90 feet width of ditches 3 feet depth of ditches 24-18 inches

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

Authorized State Agent James C. Matthews

Date 10-8-10