HTE#10-5-24429R Harnett County Department of Public Health

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PERMIT # <u>26108</u>	Operation Permit	21878
		Nitrification Line ☐ Repair ☐ Expansion
0.0.	PROPERTY LOCATION: MIKE WILL	
Name: (owner) JOSEON DEPUE	SUBDIVISION Registration #	LOT #
System Installer: GERALD TEMPLE Basement with plumbing: Garage Number of Bedroom:		
Type of Water Supply: Community Public Well	Distance from well 100 feet	
System Type:	Types V and VI Systems expire in Owner must contact Health Department 6 months prio	•
(In accordance with Table Y a)	·	·
This system has been installed in compliance with applicable North Carolina General S	tatutes, Rules for Sewage Treatment and Disposal, and all conditions of t	the Improvement Permit and Construction Authorization.
Ex 133	DR 124 776	REPORT OF THE PROPERTY OF THE
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule II. Monitoring: As required by Rule .1961. Other: Subsurface system operator required? Yes If yes, see attached sheet for additional oper	No X	
IV. Operation:		
Y. Other:		
□ D-Box □ Pump	□Alarm □	H20Line D PWR Line
Following are the specifications for the sewage disposal system on the		
Type of system: ☐ Conventional ☐ Other ☐ ☐ ☐ Fl. Subsurface No. of exact let	orth width of	gallons Pump Tank: gallons depth of
Drainage Field ditches	ditch 75 feet ditches 3	feet ditches 18 inches
French Drain Required: Linear feet	_	
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