HTE# 14-5-32997

Harnett County Department of Public Health

23164

PERMIT # 27906

Operation Permit

PENNIT # 2 1100	Operation remit	
	New Installation Septic Tank Nitri PROPERTY LOCATION: Ross	fication Line 🗆 Repair 🗆 Expansion
	PROPERTY LOCATION: Ross Ro	· ·
Name: (owner) Guy & Domy Care	DMGS SUBDIVISION	LOT # <u>1</u>
System Installer: REGIMOLO CARTER	Registration #	
Basement with plumbing: Garage Number of Bedroom	registration #	
Type of Water Supply: Community Public Well		
System Type:	Types V and VI Systems expire in 5 year	arr.
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to e	
(owner must contact hearst bepartment o months prior to e	expiration for permit renewal.
This system has been installed in compliance with applicable North Carolina General	tatutes, Rules for Sewage Treatment and Disposal, and all conditions of the Imp	vovement Permit and Construction Authorization.
7,0000	1	
(5 Ch. 16))	
Aller		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	145'-	
	HOUSE	
	Protection of the Contract of	
	1_1	
	/ D	,
	MC-MD	
	1	wellengthaltidescopers world copy-respect
	ROSS RO	
	1 By	
		AN INCOMMENTAL STATE OF THE STA
PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance with Rule	1041	
II. Monitoring: As required by Rule .1961.	.1701.	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes	No 🗀	
If yes, see attached sheet for additional oper		
IV. Operation:	son conditions, maintenance and reporting.	
V. Other:		
□ D-Box □ Pump		H20Line PWR Line
Following are the specifications for the sewage disposal system on the		
Type of system: Conventional Other Chambe		gallons Pump Tank: gallons
Subsurface No. of exact len	th width of	depth of
Drainage Field ditches 6 of each of	itch feet ditches	feet ditches 12 inches
French Drain Required:Linear feet		
That I	-	١.
Authorized State Agent	REHS Date 14	4114
The state of the s	Date 1	- 1 []