Harnett County Department of Public Health 25011
PERMIT # 3009.3 Operation Permit
New Installation Septic Tank Nitrification Line Repair Expansion
PROPERTY LOCATION: 118 Hobson R.L. (SR1712)
Name: (owner) <u>Jennifer S. Thoresen</u> SUBDIVISION <u>LOT # 1</u>
System Installer: Randy Batten Registration #
Basement with plumbing: Garage Number of Bedrooms 3 Type of Water Supply: Community Public Well Distance from well 100+ feet
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.
BEALD REPAIR AREA S S S S S S S S S S S S S
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		HUBSON ROAD (ST 1712)		
PERM	IT CONDITIONS:			
l.	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 No		
		If yes, see attached sheet for additional operation conditions, maintenance and reporting.		
IV.	Operation:			
٧.	Other:			
		D-Box	PWR Line	
Following are the specifications for the sewage disposal system on the above captioned property.				
	of system:		gallons	
Subsu	ırface	No. of exact length width of depth of		
Drain	age Field	ditches 3 of each ditch 80 feet ditches 3 feet ditches 24 in	nches	
Frenc	h Drain Required:	: Linear feet	1	
Auth	orized State Ag	gent / Date 07/27/2018		

Authorized State Agent_