HTE#\_SFD1810-0048

## Harnett County Department of Public Health

No. 26039

PERMIT # 30239

**Operation Permit** 

	New Installation 🔀 Septic Tank 🙀 Nitrification Line 🗆 Repair	r 🗆 Expansion
	PROPERTY LOCATION: 14328 McDougno Ro	
Name: (owner) KEYIN KORNEGAY		Т#
System Installer: J+J SERIC (JAIME (	Registration #	
Basement with plumbing:  Garage Number of Bedroom		
Type of Water Supply:  Community Public Well		
System Type:	Types V and VI Systems expire in 5 years.	
(iii accordance with Table Y 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 S	Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Au	ithorization.
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w 1	EXISTING WELL	
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	(81.3)	
	HOUSE HOUSE	
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	th~80 ,   B	
	1 and 1 v	
	REPAIR ) E	
	( AREA )	
	ACCA	
DEDMIT COMPLETIONS		
PERMIT CONDITIONS:		
<ul> <li>I. Performance: System shall perform in accordance with Rule</li> <li>II. Monitoring: As required by Rule .1961.</li> </ul>	.1961.	
III. Maintenance: As required by Rule .1961. Other:	7 .	
Subsurface system operator required? Yes	No X	_
If yes, see attached sheet for additional opera	ation conditions, maintenance and reporting.	
IV. Operation:	1 0	_
V. Other:		_
		_
		PWR Line
Following are the specifications for the sewage disposal system on the Type of system:   Conventional Other CHARGEL	10.81	
Subsurface No. of exact leng	ganons rump rank.	gallons
	7.00	je akon
French Drain Required: Linear feet	itch feet ditches feet ditches 18	inches
The star		
Authorized State Agent	Path 3/4/19	
The state of the contract of t	Date 3 6 19	