HTE# SFD1911-0009

Harnett County Department of Public Health

25615

PERMIT # 302WA	Operation Permit	
	New Installation Septic Tank Mitrification Line Repair Expansio	n
	PROPERTY LOCATION: PIHZ BEAUTIFUL ZN	
Name: (owner) Precision Cosion)		_
System Installer: GARNER SEPTIC	Registration #	
Basement with plumbing: Garage Number of Bedroom	3	
Type of Water Supply: 🗆 Community 🛮 🔀 Public 🕒 We	Distance from well 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.	
	77'	
	ECPA'Q	
	1- ASEA	
	15'	
	710' (212'	
176/	13.	
, , ,	39	
	HOUSE	
Į		
PERMIT CONDITIONS:		_
. Performance: System shall perform in accordance with Ru	e .1961.	
II. Monitoring: As required by Rule .1961.		
II. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes	l No M	
	ration conditions, maintenance and reporting.	
V. Operation:	ration constitutions, maintenance and reporting.	
/. Other:		
□ D-Box □ Pum	□ Alarm □ H20Line □ PWR L	ine
Following are the specifications for the sewage disposal system on	he above captioned property.	
Type of system: Conventional Other CHAMB		ıs
Subsurface No. of exact le	ngth width of depth of	
Drainage Field ditches1 of each	ditch 225 feet ditches 3 feet ditches 18 inches	
Prainage Field ditches Of each French Drain Required: Linear feet		
Authorized State Agent	Date 9/18/19	