HTE# 51701903-0021

Harnett County Department of Public Health

25633

PERMIT # 30496 Operation Permit New Installation Septic Tank Nitrification Line Repair Expansion PROPERTY LOCATION: 3411 Galvidge 1:45 12 (51418) Bryan Howell LOT # 502 Name: (owner) SUBDIVISION Jann Mutthers Registration # System Installer: Garage Number of Bedrooms Basement with plumbing: Distance from well _ ~~A Public Type of Water Supply:

Community ☐ Well _ Types V and VI Systems expere in 5 years. System Type: 25% reduction 313.1 Owner must contact Health Department 6 months prior to expiration for permit renewal. (In accordance with Table V a) 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. GALAGE 0 E W CAKRIDGE LIVER NOAD (ST 1418) PERMIT CONDITIONS: Performance: System shall perform in accordance with Rule .1961. 11. As required by Rule .1961. Monitoring: III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes
No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: D-Box Pump Alarm H20Line □ **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. gallons Pump Tank: Flow III 1000 gallons Other EZ Septic Tank: Type of system:

Conventional Subsurface No. of exact length width of depth of Drainage Field ditches of each ditch feet ditches ditches inches French Drain Required: Date Authorized State Agent