HTE# 5 FD1908.0013

Harnett County Department of Public Health

25881

PERMIT #	<u>Operation Permit</u>		
	New Installation 🗵 Septic Tan	ok 🔀 Nitrification Line 🗆 Repa	ir Expansion
	PROPERTY LOCATION: Wiz	L LUCAS RO	j
Name: (owner) IVERCON INC	SUBDIVISION SWEET	WATER _ LO	1# 21
System Installer: JONES SERIL	Registration #		
Basement with plumbing: Garage Mumber of Bedroom	<u> </u>		
Type of Water Supply: Community Public Well			
System Type:	Types V and VI Systems	expire in 5 years.	
(In accordance with Table V a)	Owner must contact Health Department 6 m	onths prior to 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 co	onditions of the Improvement Permit and Construction A	uthorization.
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	10 HOUSE	1	
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161	101	}	
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	RAINMA	iver.	
	57.		
DEDMIT CONDITIONS			
PERMIT CONDITIONS:	10/1		
 Performance: System shall perform in accordance with Rule 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	ation conditions, maintenance and reporting.		
IV. Operation:			
V. Other: D-Box □ Pump	□ Alarm □	U201: □	DWD L:
		H20Line 🗆	PWR Line
Following are the specifications for the sewage disposal system on the		1000	2000014 ** 4.33 0-77
Type of system: ☐ Conventional ☐ Other ☐ HAMBI Subsurface No. of exact len		gallons Pump Tank:	gallons
Subsurface No. of exact len Drainage Field ditches of each of	gth width of itch <u>348</u> feet ditches _	depth of ditches 18-3	inches
French Drain Required: Linear feet	reet ditches	icer dircheso e	- inches
and the			
Authorized State Agent	RENS	Date 10/24/19	
Authorized State Agent	New Town	Date 10/24/17	