HTE# 555) 1909-0022

Harnett County Department of Public Health

25964

PERMIT # _____

Operation Permit

	New Installation 🗷 Septic Tank 🛛 Nitrification Line 🗆	Repair Expansion
	PROPERTY LOCATION: 801 Dalma Gines 1	d./5/21701)
Name: (owner) APR - restoration		LOT #
System Installer: Yellow Dog Grad	Registration #	
Basement with plumbing: Garage Number of Bedroom	ms 3	
Type of Water Supply: Community Public Wel		
11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Types V and VI Systems expire in 5 years.	P
(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.		
School 1997	PONCH PO	MGER
	NITH (THREELS) ECONAL 90	FT CINES
PERMIT CONDITIONS:	NOTE: POWER CROSSED END O	FUNE!
I. Performance: System shall perform in accordance with Ru	Ile 1961. POST-INSTALL, THE LOST	
III. Maintenance: As required by Rule .1961. Other:	WERE SHIFTED TO THE S	STANT OF
Subsurface system operator required? Yes		,
	eration conditions, maintenance and reporting.	
IV. Operation:		
Y. Other:		
□ D-Box □Pump	p 🗆 Alarm 🗆 H20Line 🗆	PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.		
71 7	Septic Tank: 1005 gallons Pump Tanl	
Subsurface No. of exact le	ength width of depth of of depth of a ditches	-1 C3a
Drainage Field ditches1 of each French Drain Required: Linear feet	altches teet altches teet altches _	inches
Trench prain required Linear reet		
Authorized State Agent Date 12 11 2020		