Harnett County Department of Public Health

No. 26243

HTE# 55701910-004L Operation Permit PERMIT # ______ 3~1437 New Installation 🗷 Septic Tank 🔀 Nitrification Line 🗆 Repair 🗆 Expansion PROPERTY LOCATION: 12 TOSEPH ALEXANDER DR. LAMMERCAND) Name: (owner) KEITH BULLOW GUDS SUBDIVISION BALLOWS WOODS LOT # 108 Registration # System Installer: YELLOW DOG CLASSING Garage X Number of Bedrooms Basement with plumbing: Type of Water Supply:

Community
Public
Well Distance from well _ ~~ 25% NEDUCTION 5%. IIIG Types Mand VI Systems expire in 5 years. System Type: 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. * GLAVITY TO SERIAL DISTUIDUTION CHAMBER * LINE 1: 102FT LINE 2: 107FT * POTENTIAL SCLIT PERMIT CONDITIONS: System shall perform in accordance with Rule .1961.

As required by Rule .1961. Performance: II. Monitoring: As required by Rule . 1961. Other: III. Maintenance: Subsurface system operator required? Yes 🗌 No 🔀 If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: Following are the specifications for the sewage disposal system on the above captioned property. X Other Q4 CHAMBER ING Septic Tank: 1000 gallons Pump Tank: Type of system:

Conventional exact length width of Subsurface No. of ditches 22-24 inches 302 feet of each ditch ditches Drainage Field ditches

French Drain Required: Authorized State Agent____

Linear feet

06 26 2020