HTE# SF 52001-004222

Harnett County Department of Public Health

No. 26164

PERMIT # NA

Operation Permit

≥ New Installation ≥ Septic Tank ≥ Nitrification Line □ Repair □ Expansion
PROPERTY LOCATION: 11326 OS 401 O.
Name: (owner) ALLAND CANNOT BLOS TOC SUBDIVISION W NOT BANCON LOT # TRIFT
System Installer: GENES BACKLICE Registration #
Basement with plumbing: Garage * Number of Bedrooms
Type of Water Supply: Community Public Well Distance from well A feet
System Type:
(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.
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Owner regrest
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1 1 10 - 8'- P JBR POOL MORE THAN STANDARD
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1 1 - 42 L. 3-5 YEARS
* CARBAGE DISPOSAL IS NOT
ABUISED BUT PERMISSIBLE
* A1557 6
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PERMIT CONDITIONS:
I. Performance: System shall perform in accordance with Rule .1961. H. Monitoring: As required by Rule .1961.
Subsurface system operator required? Yes 🗆 No 🔀
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:
V. Other:
□ D-Box □ Pump □ Alarm □ H20Line □ PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.
Type of system: Conventional Other FFF FLED JILL Septic Tank: 1250 gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of
brainage rich ditches leet ditches inches
French Drain Required: Linear feet
Authorized State Agent Date 05/21/2020
Authorized State Agent Date Date