HTE# 5FD2005-0024

Harnett County Department of Public Health

No. 26720

PERMIT # _____A

Operation Permit

	New Installation Septic Tank Nitrification Line Rep	air 🗌 Expansion
	PROPERTY LOCATION: 810 MANUE VECHUNCH 10	- (S/LIST4)
Name: (owner) _ WEAVER HOMES IN	SUBDIVISION STEPHENSON FARMS	
System Installer: YELLOW DOG GLASIN		
Basement with plumbing: Garage Number of Bedrooms		
Type of Water Supply: Community Public Well	Distance from well A feet	
System Type: 25% VESUCTION 575.	Types V and VI Systems expire in 5 years.	
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for permit renew	al.
- An		
This system has been installed in compliance with applicable North Garolina General State	stutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction	Authorization.
	& DERIAL DISTRIBUTION	(CA)
	EN CHANGEN CONVE	ered
	F B CHANGEN CONVE	
l l	The state of the s	
- 321 -	CHAMBER CONVE	
	ODSITE AT INST	
	AS REQUESTED	>
- 20 -	* NO AREAR POOL	
	CAMANTEED	
	30 16 1	
	1-1-1-1	
ao',		
	5=>	
	34	
	1 8/23/	
	55'	
PERMIT CONDITIONS:	1041	
I. Performance: System shall perform in accordance with Rule .	.1961.	
II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes No		
If yes, see attached sheet for additional operati		
IV. Operation:	constraint, maintenance and reporting.	
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 GH CH		gallons
Subsurface No. of exact length		2. (
	tch $\underline{3}$ feet ditches $\underline{3}$ feet ditches $\underline{\sim}$	inches
French Drain Required: Linear feet		
Authorized State Agent	Date 10/22/2020	,
0		