HTE#_S=>2005-0027

Harnett County Department of Public Health

No. 26439

PERMIT #	Operation Permit	311538
	🗵 New Installation 🗵 Septic Tank 🗵 Nitrific	
	PROPERTY LOCATION: 123 Powowiza	
Name: (owner) AMBER + MICHAEL PERCO	SUBDIVISION	LOT #
System Installer:CLI DT NOOMS	Registration #	
Basement with plumbing: Garage Number of Bedroom:		
Type of Water Supply: □ Community ☑ Public □ Well System Type: 25% ないこうこう きょうし		n
(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.		
This system has been installed in compliance with applicable North arolina General S	atutes, Rules for Sewage Treatment and Disposal, and all conditions of the improv	ement Permit and Construction Authorization.
& CANOTH TO D-BOX		
TEGURE DISTRIBUTION		/
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PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule		1.
 Performance: System shall perform in accordance with Rule Monitoring: As required by Rule .1961. 		
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required Yes 🗆		
If yes, see attached sheet for additional operation:	ation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
□ D-Box □ Pum	p 🗆 Alarm 🗆	H20Line D PWR Line
Following are the specifications for the sewage disposal system on the		" D T 1 "
Type of system: ☐ Conventional ☑ Other <u>F.Z.</u> Subsurface No. of exact let		gallons Pump Tank: gallons depth of
		feet ditches 22 inches
French Drain Required: Linear feet		
		1 7
Authorized State Agent	Date	2 30 2020