HTE# 5FD 2007-0083

## Harnett County Department of Public Health

No. 26461

PERMIT # NA

Operation Permit

	☑ New Installation ☑ Septic Tank ☑ Nitrification Line ☐ Repair ☐ Expansion
	PROPERTY LOCATION: 1030 W. STULKLAMD ND. (SNITES)
Name: (owner) Burn Bourge COT	SUBDIVISION TRAVIS RAY ADAMS LOT # 3
System Installer: 6 RNRS BACKHOR	
Basement with plumbing: ☐ Garage ☑ Number of Bedrooms	
Type of Water Supply:   Community  Community  Wublic   Well	
System Type: 2570 120001010 545. III	
(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 Sta	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
14)	46' 90' 120' 120' 120'
	90(3) *PUMP TO MEDIUM D-BOX
	TOM TO MEDIUM D-ROY
25%	EGLAL DISTRIBUTION
	REGIAL DISTRIBUTIONS
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PERMIT CONDITIONS:	,
I. Performance: System shall perform in accordance with Rule	1961. 1961.
II. 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 opera	tion 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  Type of system:  Conventional  Other  Type of system:  Septic Tank:  Ocoo gallons Pump Tank:  Ocoo gallons	
Subsurface No. of exact leng	th width of depth of
Drainage Field ditches 3 of each di	tch $90$ feet ditches $3$ feet ditches $34 \rightarrow 20$ inches
French Drain Required:Lingar feet	
Al Sen //	
Authorized State Agent	Date 62 25/2021
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