Harnett County Department of Public Health

		, .			
PERMIT # SPD 210	16-0003	Operation	Permit		
				ification Line 🗆 Repair 🗀	Expansion
		PROPERTY LOCA	TIONS/4513 Netlls	Cookirs	
Name: (owner)	W Sealey + ASS	SUBDIVISION	Southlich		59
System Installer:	TONES Septic				
Basement with plumbing: Garage Number of Bedrooms Fupe of Water Supply: Community Public Well Distance from well Functions feet					
			teet	ior:	
System Type: 25% Red System Type # 6 Charles 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 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.					
		106			
		054	Sta-		
		150 o Red Sy	in anos		
		12,00	Pio		
		TOT	18		
		ZIP	$\frac{1}{2}$		
	K	218	618		
	, 7	10	lin' I m	1	
	15		th N		
	(0)	(0)	56		
		3000	eri o		
			54		
		1 1	1		
		7	30		
		ú	D		
		4	15	-	
		4	4		
FNDIGO STREET					
PERMIT CONDITIONS:					
	ystem shall perform in accordance with	Rule .1961.			
	As required by Rule .1961. Other:				
	ubsurface system operator required? Ye	s 🗆 No 🗆			
	yes, see attached sheet for additional	operation conditions, maintenance	e 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: Con			Septic Tank: 1000	gallons Pump Tank:	gallons
		ct length each ditch 254 feet	width of ditches 3	depth of ditches 22-713	inches
French Drain Required: Linear feet					
Authorized State Agent State Agent Parts Date 17-6-21					
Authorized State Agent Date 12-6-21					