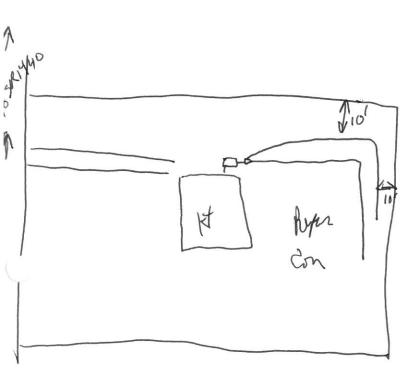
No

6189

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Janua Vores	New Installation	Septic Tank		
Property Location: SR# 1949	☐ Repairs			
Subdivision Mc Adams	Lot #			
Contractor: Tel Brown	Registration # 4			
Basement with Plumbing: Garage: Garage:				
Water Supply: Well Public Community				
Distance From Well: 50 ft. any cxst				
Following are the specifications for the sewage disposal system on above captioned property.				
Type of system: Conventional Other	4.40	į.		
Size of tank: Septic Tank: /DDD gallons Pump	Tank: gallons			
Subsurface No. of exact length of each ditch	width of ft. ditches ft.	depth of ditches 12-24 in.		
French Drain: Linear feet				
√	te: 01-25-93	1. By R. S.		
	Environmental H	lealth Specialist		



HARNETT COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT

Mo

6832

e it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department".

Name: (owner) formy	Norra	_ New Installation	Septic Tank
		_ □ Repairs	Nitrification Line
Inc Adams	bot 12		
Number of Bedrooms Proposed:	3 Lot S	ize: 34/7	
Basement with Plumbing: Ga	arage:		
Water Supply: Well	blic 🗆 Communit	СУ	
Distance From Well:	_ ft. any other		
Following is the minimum specific property. Subject to final approv	ications for sewage d	lisposal system on al	ove captioned
Type of system: Conventional	Other		
Size of tank: Septic Tank: 1000	_ gallons Pump	Tank: gallo	ns
Subsurface No. of Drainage Field ditches	exact length of each ditch	width of ft. ditches ft.	depth of ditches 18-24in.
French Drain required:	_ Linear feet	10 / 1	1-
This permit is subject to revocati	on if site D	ate: 10/28/	92
ns or intended use change.	Si	igned: At A	Agril 18.5.
VOID AFTER 5 YEARS		Environmenta	l Health Specialist
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