HTE# 06-5-16096

Harnett County Department of Public nealth 19073

	Operation Permit	173
	✓ New Installation ✓ Sentic Tank □ B ✓	nline 🗁 -
Name: (own		
System Insta	Her: Kentreth Weekes Registration #	LOT 41
pasement with	promotily, I harana lad bloom to the	_LOT #
Type of Water	Supply: Community of bedrooms	
system type. Z	3 % // EDUCTION) = T	
(In accordance	with Table V a) Owner must collect Health Dearward Health Dea	
This system has bee	Owner must contact Health Department 6 months prior to expiration for permit re	newal.
	en installed in compliance with applicable Morth Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Constructions	
	EX mois A Part of the contract of the contrac	ction Authorization.
MIT CONDITIONS: Performance: Monitoring: Maintenance: Operation:	System shall perform in accordance with Rule 1961. As required by Rule 1961. Other: Subsurface system operator required? Yes \(\sqrt{No} \sqrt{\sqrt{No}} \s	
Other:		
		
ing are the speci	fications for the sewage disposal system on the above captioned property	
ing are the speci f system: [] (fications for the sewage disposal system on the above captioned property. Conventional Other 15% DEDUCTION Seek Street S	
ace	fications for the sewage disposal system on the above captioned property. Conventional Other 25% REDUCTION Syst Size of tank: Septic Tank: 1000 gallons Pump Tank: width of depth of depth of	gallons