HTE#<u>BEES 1907-0011</u>

Harnett County Department of Public Health

25791

PERMIT #	Operation Permit
<u> </u>	
	PROPERTY LOCATION: 217 TYOMUS Farm Rd
Name: (owner) Griselda Torres	SUBDIVISIONLOT #
System Installer: Shaw Cox	Registration #
Basement with plumbing: Garage Mumber of Bedrooms	4
	Distance from well feet
System Type: III 9 Quick 4+	Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewal.
(In accordance with Table V a)	owner must contact nearth bepartment o months prior to expiration for permit renewal.
This system has been installed in compliance with applicable North Carolina General Statute	ss, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement, Permit and Construction Authorization.
DWMH UBE 28' X 72' Thomas Farm Rd	
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule .1. II. Monitoring: As required by Rule .1961. Maintenance: Subsurface system operator required? Yes \sumbox No If yes, see attached sheet for additional operation.	
If yes, see attached sheet for additional operation.	ni conunions, manitenance and reporting.
V. Other:	
□ D-Box □ Pump □	Alarm H20Line PWR Line
Following are the specifications for the sewage disposal system on the a	bove captioned property.
Type of system: Conventional Other THE	
Subsurface No. of exact length Drainage Field ditches of each ditc	1107
French Drain Required: Linear feet	
1 11 11	
Authorized State Agent	CEHS Date 11/20/19