CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Contractor: W. Sharpe Basement with Plumbing: Garage: Water Supply: Well Public Community	Repairs Nitrification Line Lot # Quadrant # Registration #
Distance From Well: ft.	
-011-	Tank: _^/A gallons
6-21/900 C5-1939 1000 510 339 1000 3 BR	13'4) (12' >> 13'4) (12' >> 13'4) (12' >> 13'4) (12' >> 13'4) (12' >> 15

IMPROVEMENT PERMIT

Be 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) Kilonold Corp. Property Location: SR# O4 West - Repairs Nitrification Line Subdivision Repairs Lot # Tax ID# Quadrant #
Number of Bedrooms Proposed: Lot Size:
Basement with Plumbing: Garage: Water Supply: Well Public Community
Distance From Well: ft.
Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length 100 width of depth of depth of ditches in.
This permit is subject to revocation if site plans or intended use change. Date: Signed:
VOID AFTER 5 YEARS WAShing Environmental Health Specialist
Georgia Lique To Repair Way PRINT TO ALCG 258