HTE#14-5-34599X	Harnett County Department of Public Health 23874	
PERMIT # 28073	Operation Permit	
000000000000000000000000000000000000000	New Installation 🗹 Septic Tank 🗹 Nitrification Line 🗆 Repair 🗀 E	xpansion
_	PROPERTY LOCATION: SC 1532 ONK GROVE CAUNCELY NI	)
Name: (owner) Juseph		? <del>/</del>
System Installer: CARVEN		
1 0	Númber of Bedrooms	
System Type: Pumpto 25 22	reforeton Type I 3-Chartypes + and VI Systems Paxpire 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 appli	icable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the improvement Permit and Construction Authorization.	
	TWEEDS Pump.	- MAN
	' /	
	66 360 4 FV	
	le l	
	1 A A A A A A A A A A A A A A A A A A A	
	9 / 1 8	
	Homestead work	
PERMIT CONDITIONS:  I. Performance: System shall perform	n in accordance with Rule .1961.	
II. Monitoring: As required by Rule		
	.1961. Other:	
	perator required? Yes \(\simega\) No \(\simega\) sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:		
V 04h		
V. Other:	Pump	PWR Line
D-Box		- I III LIIIG
Type of system:   Conventional	Other Complete Control of Control	gallons
Subsurface No. of	exact length width of depth of	· · · ·
Drainage Field ditches 3 French Drain Required:	of each ditch <u>100</u> feet ditches <u>3</u> feet ditches <u>24</u> i	inches
Trench Diani nequireu.		
Authorized State Agent	S Alat. F- Date 1-8-16	