Harnett County Department of Public Health 24255 Operation Permit PERMIT # 2887 Z New Installation Septic Tank Mitrification Line Regair Expansion PROPERTY LOCATION: SNY 35 CARROLD BUNCAS Name: (owner) WILLTAN SUBDIVISION System Installer: Registration # Basement with plumbing: Garage Mumber of Bedrooms Type of Water Supply:

Community Public

Well Distance from well ____ System Type: 25/6 18 DUCTION System Type TI Co Types V and VI Systems expire 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 applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. 65 10 10 10

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PERMIT CONDITIONS:										
l.	Performance:	System shall perform in accordance with Rule .1961.								
II.	Monitoring:	As required by Rule .1961.								
III.	Maintenance:	As required	by Rule .1961.	Other:						
	Subsurface system operator required? Yes No									
	If yes, see attached sheet for additional operation conditions, maintenance and reporting.									
IV.	Operation:	0		N N N N N N N N N N N N N N N N N N N						_
									45,444	
٧.	Other:									_
J_		_ D-Box		Pump 🗆	Ala	rm 🗆		H20Line		PWR Line
following are the specifications for the sewage disposal system on the above captioned property.										
	of system:			15h Ral 565 H		Septic Tank: _	1250	gallons	Pump Tank:	gallons
ubsu	rface	No. of	11	exact length	\	width of	-	— 8	depth of	8uiioiis
)raina	age Field	ditches	9	of each ditch	feet	ditches	5	feet	ditches ZZ >/	S inches
rench	Drain Required:			inear feet				-		
				201	1	- acus		-		
Authorized State Agent Date 1-6-17										
June 1										