HTE# 07-5	1888277 Harnett County Department of Public Health 19870
PERMIT # _244	• • • • • • • • • • • • • • • • • • • •
	New Installation
N /	PROPERTY LOCATION: SKITSE RD
Name: (owner) Z	PAUL NETGIAGOS SUBDIVISION LOT #
Basement with plum	Gerold Taple Registration #
Type of Water Supp	ly: Community Public Well Distance from well feet
(In accordance with	ly: Community Public Well Distance from well feet    GREDUCTION System Types TIT G E-21M4 Types V and VI Systems expire in 5 years.    Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal.
This sustain has been inc	
THIS SYSTEM HAS DEEN HIS	talled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
	SRITAGE WISERD FULL STOTE & (II'')  * WILLIAMS 15'+ Off OFTANK+ LINES
	SR 1799 WISERD FUIL SIGNAL COLLET
	WILLIAS IS + Off
	[4 D] 1 [3 3] CB
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	J. A.
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DEBMIT COMPUTIONS	
PERMIT CONDITIONS:  I. 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
IN O	If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:	
V. Other:	
Following are the spec	ifications for the sewage disposal system on the above captioned property.
Type of system:	Conventional Other 25% REDVCROD System Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons
Subsurface Drainage Field	no. of exact length width of depth of
French Drain Required:	
And the second	ent amos Mashon force.  Date 5:13:60
Authorized State Ag	ent amos Mashant Date 5:13.60