HTE# 16-5.4T	Harnett County Department of Public Health 25226
PERMIT # 291	Operation Permit
	New Installation Septic Tank Nitrification Line  Repair  Expansion
	O O PROPERTY LOCATION: 1 LOCE - R
Name: (owner)	
System Installer:	EDDIC CORNER Registration # 110 D Trader
Basement with plumb	ing:    Garage Number of Bedrooms   198 Day 114 arg
Type of Water Supply System Type:	Registration # 48 Day Tradiscription   Community Public  Well Distance from well
(In accordance with T	
,	40 100
This system has been insta	lled in compliance with applicable of Scarolina General Statutes, Rules for Sewage I pagment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
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	CT TRADING
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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
IV Operation:	If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:	
V. Other:	
	cifications for the sewage disposal system on the above captioned property.
Type of system:	Conventional Dother Change Change Ho Septic Tank: 100 gallons Pump Tank: gallons  No. of exact length width of depth of
Drainage Field	No. of exact length width of depth of d
French Drain Required	

Authorized State Agent\_