HTE# 13 5-32512

Harnett County Department of Public Health

PERMIT # 2770 G		Operation	230	23015	
		☐ New Installation		itrification Line Repair	Expansion
Name: (owner)	ED ROHN	SUBDIVISION _	V. H.	7 LOT :	# <u>/</u> &o
System Installer:		, Registration			100
Basement with plumb	0 /	nber of Bedrooms 3			
Type of Water Supply					
(In accordance with	1/2 17/31/2 CTUN Sys			years. to expiration for permit renewal.	
(41. 222. 231. 2				orponation for partition continues	
This system has been insta	alled in compliance with applicable No	h Carolina General Statutes, Rules for Sewage Treatment an	d Disposal, and all conditions of the	Improvement Permit and Construction Autho	rization.
			3		
PERMIT CONDITIONS:					·
I. Performance:	System shall perform in acc	rdance with Rule .1961.			
II. Monitoring: As required by Rule .1961. Maintenance: As required by Rule .1961. Other:					
	Subsurface system operator	equired? Yes 🗆 No 🗀			
IV. Operation:	•	additional operation conditions, maintenance a			
т. орстаноп.					_
V. Other:					
	D-Box 🗆	Pump 🗆 Al	arm 🗆	H20Line 🗆	PWR Line
		al system on the above captioned property.		# B **	
Type of system: Subsurface	Conventional Other No. of	exact length _	الماسلىل ما	gallons Pump Tank: depth of	gallons
Drainage Field	ditches 2	of each ditch 80 feet	ditches3	feet ditches 24	inches
French Drain Required	l:	near feet			
		in 1 fr			