HTE# 09-5-	<u> এচিম</u> া Harnett County Department of Public Health 20542	4
PERMIT # <u>251</u>	New Installation 🗵 Septic Tank 🗆 Repair 😾 Nitrification Line 🗆	Expansion
Name: (awner)	MARIYETA MCLEAN SUBDIVISION LOT#	
, , –		
	T+5 Denning Forms Registration #	
Basement with plumb		
System Type:		
(In accordance with		
(in accordance with	owner must contact health department o months prior to expiration for permit renewal.	
This system has been insta	alled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization	on.
	SOLO SOLO	
PERMIT CONDITIONS: I. Performance: II. Monitoring: III. Maintenance:	System shall perform in accordance with Rule .1961. As required by Rule .1961. Other:	
	Subsurface system operator required? Yes \( \subseteq \text{No } \subseteq \)	
IV. Operation:	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
ii. operation.		
V. Other:		
ru · ·		
tollowing are the spec	cifications for the sewage disposal system on the above captioned property.	
Type of system:	Saloro Fund Tank	gallons
Subsurface Drainage Field	No. of exact length width of depth of ditches of each ditch feet ditches 3 feet ditches 18	
orainage rieio French Drain Required:	ditties	inches
rrench pram kequired:	The second secon	
Authorized State Ag	gent	