HTE# 11-5-2	Tros Ren Harnett County Department of Public Health	23338
PERMIT #	6543 Operation Permit	
	✓ New Installation ✓ Septic Tank ✓ Nitrification L	ine 🗆 Repair 🗆 Expansion
Name: (owner)	PROPERTY LOCATION: 52/564 Maple A ED + Gener Kelly SUBDIVISION ADvock Brownsfton Registration #	LOT #
System Installer: _ Basement with plumb	Registration #	
Type of Water Supply	y: Community Public Well Distance from well feet	
System Type: Per (In accordance with 1	Table V a) Owner must contact Health Department 6 months prior to expiration f	'an aanait naaanal
`	alled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Pen	•
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		NEEDS Prop & Ahon
DA X Y S S S S S S S S S S S S S S S S S S	The sold maple RD	7 1/2 1/205
PERMIT CONDITIONS: I. Performance:	System shall perform in accordance with Rule .1961.	
II. Monitoring: III. Maintenance:	As required by Rule .1961. As required by Rule .1961. Other:	
m. rrannenance:	Subsurface system operator required? Yes \(\sigma\) No \(\sigma\)	
IV. Operation:	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
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V. Other:		
	D-Box	PWR Line
	cifications for the sewage disposal system on the above captioned property. Conventional Other Pumple 25% Repuse Septic Tank: 1000 gallons P	ump Tank: gallons
Subsurface	No. of exact length width of	depth of
Drainage Field French Drain Required:	1000	ditches 28→18 inches
Authorized State Ag	gent James & Manhant we rows Date 9-	26-14