HTE# 07.500 18433

Harnett County Department of Public Health 19780

Operation Permit

PERMIT # 24317	Operation Permit New Installation Septic Tank □ Repair Nitrification Line □ Expansion	
	PROPERTY LOCATION: Leaflet Ch. Rel	urincation time Expansio
Name: (owner) WAYNE FACEAC	SUBDIVISION	LOT #
System Installer: M. K. Cas	Registration #	
Basement with plumbing: Garage Number of Bedroom		
Type of Water Supply: Community Public Wel		
System Type: Cravel	Types V and VI Systems expire in 5 years.	
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for	permit renewal.
This system has been installed in compliance with applicable North Carolina General	Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Perm	it and Construction Authorization.
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PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance with Ru	le .1961.	
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes	eration conditions, maintenance and reporting.	
IV. Operation:	traudi Conditions, maintenance and reporting.	
V. Other:		
	the above cantioned property	
Following are the specifications for the sewage disposal system on t	the above captioned property. Size of tank: Septic Tank: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	'ump Tank: gallo
Following are the specifications for the sewage disposal system on to Type of system: Conventional Other Care Subsurface No. of exact le	Size of tank: Septic Tank: 1000 gallons P	depth of
Following are the specifications for the sewage disposal system on to Type of system: Conventional Other Care Subsurface No. of exact le	Size of tank: Septic Tank: 1000 gallons P	