Harnett County Department of Public Health 19308 HTE# 197.500 16497 PERMIT # 2345 **Operation Permit** New Installation Septic Tank Repair Nitrification Line Expansion PROPERTY LOCATION: 1139 SUBDIVISION Tingen Place LOT # 59 Israel Lucas Name: (owner) ____ Registration # ___ System Installer: Basement with plumbing: Garage Mumber of Bedrooms Type of Water Supply: Community
System Type: Tafe Instan ☐ Public ☐ Well _____ 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 Sewagg Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. 15 3)aNE Dech 10 PERMIT CONDITIONS: Performance: System shall perform in accordance with Rule .1961. 11. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes 🗌 No 💢 If yes, see attached sheet for additional operation conditions, maintenance and reporting IV. Operation: ٧. Other: Following are the specifications for the sewage disposal system on the above captioned property. Type of system:

Conventional Other Www. Size of tank: Septic Tank: gallons Pump Tank: Subsurface exact length No. of width of Drainage Field ditches of each ditch _ ditches French Drain Required: Linear feet

Authorized State Agent