HTE# 07-8-16546

Harnett County Department of Public Health 19051

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PERMIT # 24049	Operation Permit	
	New Installation Septic Tank Repair Nitrification I	Line 🗆 Expansion
	PROPERTY LOCATION: 521440	
Name: (owner) For Developer, Inc		LOT # <u>5</u>
System Installer: Acci Blog.	Registration #	
Basement with plumbing: Garage Mumber of Bedrooms Type of Water Supply: Community Deblic Well	Distance from well feet	
System Type:G	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 rene	ewal.
This system has been installed in compliance with applicable North Carolina General Stati	utes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Constructi	ion Authorization.
	EASE MENT 22 17 House 26 Delta	
PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule .1	Topsoil Dr.	
II. Monitoring: As required by Rule .1961.	701.	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes 🗌 No		
If yes, see attached sheet for additional operation	on conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
Filling and the configuration (C. 2)		
Following are the specifications for the sewage disposal system on the a Type of system: Conventional Other EZF/6	(And)	-alla
Subsurface No. of exact length	width of denth of	gallons
Drainage Field ditches of each ditc	h δ feet ditches 3 feet ditches 2	· <u> </u>
French Drain Required: Linear feet		
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Authorized State Agent Lucy Lucy Lucy	1- Date 5/3/12007	