HTE# 07-5-16657

Harnott County Danaut

	nametic county Department of Public Health 2	0060
PERMIT # <u>23</u>	751 Operation Permit	
	New Installation Septic Tank Repair Nitrification	line Evnendi
Name (cine 🗀 expansio
Name: (owner)	SUBDIVISION Automo Point	LOT # Z∫
Basement with plu	Registration #	
Type of Water Sur	1 To a section of the	
System Type:	15 16 Plan Fighter Transtate Colory Transfer	
(In accordance wit	th Table V a) Owner must contact Health Department 6 months prior to expiration for permit ren	awal
This system has been in	installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construct	
		ion Authorization.
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	To Je Park & ON DIATE	ITHES!
	/ / / Special States / Des Division	
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	375-10009	
	2 1 46 SFD	
	1, 60.	
	MENTER	
PRINT COMPUTATION		
ERMIT CONDITIONS: Performance:	Sustan shall a star in the sta	
. Monitoring:	System shall perform in accordance with Rule .1961. As required by Rule .1961.	
I. 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.	
. Operation:		
Other:		
other:		
llowing are the spec	cifications for the sewage disposal system on the above captioned property.	
be or system.	I DOVADITIONAL LAS (14ham 2 artis) 7 C \	
osurface	exact length	gallons
ainage Field	ditches $\frac{7}{1}$ of each ditch $\frac{7b}{10}$ feet ditches $\frac{3}{10}$ feet ditches $\frac{74}{10}$,
nch Drain Required:	Linear feet ditches 21	inches
	5 11 / 10.18	
thorized State Ag	tent omes Manhant Data 7-17-08	