HTE# 07-500-16911 Harnett County Department of Public Health 2092	3
PERMIT # 23682 Operation Permit	
Name: (owner) Thomal Drangerfice Subbitision Septic Tank Repair Nitrification Line Name: (owner) Thomal Drangerfice SUBDIVISION Declaration C Name: (owner) Therapited Subbitision Declaration C System Installer: Terry mapks Registration Registration LOT Basement with plumbing: Garage Number of Bedrooms Registration # Type of Water Supply: Community Public Well Distance from well Loo feet System Type: Quick H Example of Well Distance from well Loo feet System Type: Quick H System 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 Permit and Construction Authoriza	3
	1
Prive JBR Prish Mark Alle 1961.	80
III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes D No SC If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: V. Other:	
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional 72 Other Content 4 Septic Tank: Subsurface No. of exact length exact length ditches depth of depth of Septic Tank: Type of each ditches 230 feet ditches 3 feet ditches 8	gallons inches
Authorized State Agent 9.30-09 Date Date	