HTE# <u>07-5-16</u>	Harnett County Department of Public Health	
PERMIT # 239-	<u>Operation Permit</u>	22680
	🔽 New Installation 🖾 Septic Tank 🖾 Nitrification Line 🗆	Repair 🗀 Expansion
	PROPERTY LOCATION: 511525 John Hayes RD SHEC HoldEngs The SUBDIVISION Horden PT	lot # <u>28</u>
Name: (owner) System Installer:	Freddie STAncel Registration #	L01 #
Basement with plumbing:  Garage Vumber of Bedrooms 3		
Type of Water Supply: Community Public Well Distance from well feet System Type: <u>25% Reinvector System Type STE G BL Cong</u> 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 Permit and Construction Authorization.		
	$ \begin{array}{c}                                     $	
I E KM		
Weathonby CT		
PERMIT CONDITIONS:		
I. Performance:	System shall perform in accordance with Rule .1961.	
II. Monitoring: III. Maintenance:	As required by Rule .1961. As required by Rule .1961. Other:	
	Subsurface system operator required? Yes $\square$ No $\square$ If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
□	D-BoxPumpAlarmH20Line	PWR Line
	ifications for the sewage disposal system on the above captioned property. Conventional 🛛 Other <u>25% 7650 c non</u> Septic Tank: <u>1000</u> gallons Pump Tan	ly. azilons
Type of system: 🛛 Subsurface	No. of exact length width of depth of	-
Drainage Field French Drain Required		28-18 inches
Sight for 1 acting		
Authorized State Agent Date Date Date Date Date		
	$\mathcal{O}$	