HTE# 07-5-17003 Harnett County Department of Pub Health 19505

PERMIT # 2378	Operation Permit
	New Installation Septic Tank Repair Mitrification Line Expansion
	PROPERTY LOCATION: SCISTS STAR Hours
Name: (owner)	
Name: (owner)	
	TefeThompson Registration #
Basement with plumbin	
Type of Water Supply:	Community Depution Well Distance from well feet Types V and VI Systems expire in 5 years.
(In accordance with Ta	The tall to part in a feature
(III accordance with Ta	bie 4 a) Switch must contact hearth bepartment o months prior to expiration for permit renewal.
This system has been installed	ed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
	96'
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	N Danto
	4
	38 77
	4)
	6.1
	12' 41' SFD 12'
	1 70
	5
	- V
	HENRY PIFIE LN
PERMIT CONDITIONS:	
 Performance: 	System shall perform in accordance with Rule .1961.
II. Monitoring:	As required by Rule .1961.
III. Maintenance:	As required by Rule .1961. Other:
	Subsurface system operator required? Yes \(\subseteq \text{No} \subseteq \)
III O	If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:	
V Othor	
V. Other:	
Following are the spec	ifications for the sewage disposal system on the above captioned property.
	Conventional Other 25% NGIVOTO Selection of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons
Subsurface	No. of exact length width of depth of
Drainage Field	ditches of each ditch feet ditches feet ditches inches
French Drain Required:	
	70 1 1003
/	5Mal 1013