HTE# 07-500-1705 Harnett County Department of Public Health 20129	9
PERMIT # 24658 Operation Permit	
Name: (owner)	lo
De 20 - Organ 12 120	
PERMIT CONDITIONS: 1. 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 No No No No No No No No No N	
V. Other:	
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other Oth	gallons
Authorized State Agent () A)	