HTE# 07-500-17429 PRR Harnett Co	ounty Department of Public Health	21475
PERMIT # $25517$	Operation Permit	
Name: (owner) A Contract  System Installer: Sharpc  Basement with plumbing: Garage Number of Bedrooms  Type of Water Supply: Community Public Well  System Type: Promise Value  (In accordance with Table Va)	New Installation Septic Tank Repair PROPERTY LOCATION:  SUBDIVISION RATIONS  Registration #  Distance from well Feet  Types V and VI Systems expire in 5 years.  Owner must contact Health Department 6 months prior to expiration	LOT #
This system has been installed in compliance with applicable North Carolina General Sta	atutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Per	rmit and Construction Authorization.
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PERMIT CONDITIONS:  I. Performance: System shall perform in accordance with Rule .1.  II. Monitoring: As required by Rule .1961. Other:  Subsurface system operator required? Yes \( \square\$\) No lf yes, see attached sheet for additional operation:	<b>4</b>	,
V. Other:		
Following are the specifications for the sewage disposal system on the ab  Type of system:  Conventional  Other  exact length  Drainage Field  ditches  Linear feet	Septic Tank: 1000 gallons Pun width of de	np Tank: gallons epth of tches inches
Authorized State Agent C	EUS Date 05-11-1	0