HTE# <u>07-</u> 6-	Harnett County Department of Public Health	
PERMIT # 266	Operation Permit 22	212
	New Installation Septic Tank Nitrification Line Repair PROPERTY LOCATION: TINGEN RO	r 🗆 Expansion
System Installer:		T# <u>7)</u>
Basement with plum		
Type of Water Suppl	ly: 🗆 Community 🔯 Public 🗆 Well Distance from well <u>100</u> feet	
System Type: (In accordance with	, , , , , , , , , , , , , , , , , , , ,	
(in accordance with	Table V a)  Owner must contact Health Department 6 months prior to expiration for permit renewal.	
This system has been inst	talled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Ai	uthorization.
PERMIT CONDITIONS:	PUMP REALIZE HOUSE	
I. Performance:	System shall perform in accordance with Rule .1961.	
II. Monitoring:	As required by Rule .1961.	
III. Maintenance:	As required by Rule .1961. Other:	- Paradentoning
	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:	, , , , , , , , , , , , , , , , , , , ,	
V. Other:		<del></del>
	D-Box	PWR Lin
Following are the spec Type of system:  Subsurface	Survive Turne Turn	-
Drainage Field	No. of exact length width of depth of ditches $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	3○ inches
French Drain Required	dinear feet	mcuez

Authorized State Agent\_