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Authorized State Agent___

HTE# <u>07.500</u>	19787 Harnett County Department of Public Health 19787	
PERMIT # 246	New Installation South Septic Tank Repair Notification Line Expa	ınsion
Name: (owner) 🟒		
System Installer:		
Basement with plumbi Type of Water Supply		
System Type:	F. Hada Qick Types V and VI Systems expire in 5 years.	
(In accordance with T		
This system has been instal	alled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.	
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	40'	
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Dave		
Vi	25%, led-ition So Ryan Mrs.	
	25 %, Wd-1-11	
	A Rusy	
	Mrs	
PERMIT CONDITIONS:	——————————————————————————————————————	
I. Performance: II. Monitoring:	System shall perform in accordance with Rule .1961. As required by Rule .1961.	
III. Maintenance:	As required by Rule .1961. Other:	
	Subsurface system operator required? Yes No Solutions, maintenance and reporting.	
IV. Operation:		
V. Other:		
Following are the spec	cifications for the sewage disposal system on the above captioned property.	
Type of system: 🗆	Conventional De Other Quick Size of tank: Septic Tank: 1000 gallons Pump Tank: g	allons
Subsurface Drainage Field	No. of exact length width of depth of depth of ditches 1824 inches	is
rench Drain Required:	t:Linear feet	

Date 11.01.07