07-500 17628 Harnett County Department of Public Health 19556 **Operation Permit** New Installation Septic Tank Repair Nitrification Line Expansion PROPERTY LOCATION: NC27 Name: (owner) Soh Home, SUBDIVISION LANCE VAlle System Installer: Registration # Garage Mumber of Bedrooms Basement with plumbing: Distance from well _______ Type of Water Supply: Community De Public Well
System Type: Mary to Inchilator Ruch 4 __ Types V and VI Systems expire in 5 years. (In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal. This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. *ڪي ا* β_{j} 75' 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 🗆 No 🕏 If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: Other: Following are the specifications for the sewage disposal system on the above captioned property. Other Kunt, Quick u Size of tank: Septic Tank: 1000 gallons Pump Tank: \ >> 3 Type of system:

Conventional Subsurface No. of exact length depth of of each ditch 303 ditches 18-21 inches Drainage Field ditches ditches French Drain Required: Linear feet Authorized State Agent