HTE# 07-5-18536

Authorized State Agent_

Harnett County Department of Public Health 19658

	The metter country bepartment of rubile fleatill 19056
PERMIT # 24	Operation Permit
IL N. La	
	PROPERTY LOCATION: Hwy 2105
Name: (owner) _	STERHEN I MILTON SUBDIVISION DEN WOODE INT # C
System Installer:	CARDENEZ Registration #
Basement with plum	bing: Garage 🔀 Number of Bedrooms
	ly: Community Public Well Distance from well 100 feet
System Type: (In accordance with	Types I and It systems expire in 3 years.
(iii accordance with	Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal.
This system has been inst	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.
	257
	CONV.
	REPAIR
	AREA
	233
	137 137
	65×65 6
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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 🔀
	If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:	
V. Other:	
Following are the residual to the first transfer of the first tran	
Type of system:	ifications for the sewage disposal system on the above captioned property.
Subsurface	No of gallons ruling talk. gallons
Drainage Field	ditches 3 of each ditch 5 feet ditches 3 feet ditches 3 inches
French Drain Required:	Linear feet ditches inches