HTE# 07.500 -18796RR Harnet	t County Department of Public Health 20	001 <b>5</b>
PERMIT # 24654	Operation Permit	
	New Installation St Septic Tank  Repair  Nitri	fication Line   Expansion
Name: (owner) 17017	SUBDIVISION FOREIT OOK	LOT # <u>\\$8</u>
System Installer: 0.) Tarakaland	Registration #	
Basement with plumbing: Garage Wumber of Bec Type of Water Supply: Community Public	drooms Well SO feet	
System Type: 1 From to C.2 Flow -	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 p	ermit renewal.
This system has been installed in compliance with applicable North Carolina Ge	eneral Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit an	nd Construction Authorization.
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1 7	Ling 15	15
Mar P/L	Da.ve	
		)6'
PERMIT CONDITIONS:	Thong a sidelines	show by Oscach
<ol> <li>Performance: System shall perform in accordance with</li> <li>Monitoring: As required by Rule .1961.</li> </ol>	1 Kule .1961.	•
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Ye If yes, see attached sheet for additional	operation conditions, maintenance and reporting.	
IV. Operation:	operation continuous, maintenance and reporting.	
V. Other:		
Following are the specifications for the sewage disposal system of	on the shave continued property	
		Tank: 100 J gallons
Subsurface No. of exact prainage Field ditches of exact prainage field ditches	ct length 230 width of G dept	th of
French Drain Required: Linear feet	each ditch 200 feet ditches 1 feet ditch	hes <u>ID</u> inches
Authorized State Agent	M) n n 15	B-DV