HTE# 07-5-18804R

Harnett County Department of Public Health 19926

PERMIT	#	24349

Operation Permit

	y cration remit	
	New Installation 🔀 Septic Tank 🗆 Repair 🖾 N	itrification Line Expansion
Names (ourse) \ \tag{-1} as a \ \tag{-1}	PROPERTY LOCATION: LEMUEL BLACK RO	
Name: (owner) WESCO DEVELOPER INC	SUBDIVISION CARLIE HILLS	LOT # <u>32</u>
System Installer. CAROENAS CONST.	Registration #	
Basement with plumbing: Garage Mumber of Bedroo		
Type of Water Supply: 🗌 Community 🛮 Public 🔲 We System Type:		
System Type: TII 5 (In accordance with Table Y a)	Types V and VI Systems expire in 5 years.	
(iii accordance with Table 7 a)	Owner must contact Health Department 6 months prior to expiration fo	ir 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 Pern	nts and facultinates that attacks
	ert. 8.	NE AND CONSTRUCTION AUTHORIZATION.
aní	REDUCTION REPAIR AREA 50 TO ROMO EDGE	
PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule II. Monitoring: As required by Rule .1961. 11. Maintenance: Subsurface system operator required? Yes If yes, see attached sheet for additional oper IV. Operation: V. Other:	No XX	
Following are the specifications for the sewage disposal system on the Type of system: Conventional Other Palystype 6 Subsurface No. of exact length of each of e	gth Size of tank: Septic Tank: 1000 gallons Pu	mp Tank: gallons epth of itches <u>18</u> inches
Authorized State Agent	R5 Date 1/29/08	