| HTE# 07-500-19043R Harnett County Department of Public Health 20004  |
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| PERMIT # 24472 Operation Permit  |
| Name: (owner)  |
| 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.  |
| To to to the state of the state |
| PERMIT CONDITIONS:  I. Performance: System shall perform in accordance with Rule .1961.  II. Monitoring: As required by Rule .1961.  III. Maintenance: Subsurface system operator required? Yes \boxedown No \boxedown If yes, see attached sheet for additional operation conditions, maintenance and reporting.  IV. Operation:  |
| Y. Other:  |
| Following are the specifications for the sewage disposal system on the above captioned property.  Type of system:  Conventional Other Van 12 Was Size of tank: Septic Tank:  ODO gallons Pump Tank:  O |
| Authorized State Agent 16 19-19-08   |

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