HTE# OB-5-1916517 Harnett County Department of Public Health 19868	
PERMIT # 24442 Operation Permit	
New Installation Septic Tank Repair Nitrification Line PROPERTY LOCATION: <u>SCITOT NEGGAUSETS 123</u> Name: (owner) <u>KEN DADSON Home Tok</u> SUBDIVISION <u>Server 77 Norks</u> 123 System Installer: <u>Fron Season</u> Registration # Basement with plumbing: Garage Number of Bedrooms <u>3</u> Type of Water Supply: Community Public Well Distance from well <u>feet</u> System Type: <u>LSPORGENCTION Systems Tipo</u> <u>ITLG Bang</u> ypes 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 Authorizati	ion
PERMIT CONDITIONS:	58
 Performance: System shall perform in accordance with Rule .1961. Honitoring: As required by Rule .1961. Maintenance: As required by Rule .1961. Other:	
IV. Operation:	
V. Other:	
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other <u>25% PED VCTUD System</u> Size of tank: Septic Tank: <u>1000</u> gallons Pump Tank: <u>subsurface</u> Subsurface No. of <u>exact length</u> width of <u>depth of or error</u> Drainage Field ditches <u>4</u> of each ditch <u>80</u> feet ditches <u>3</u> feet ditches <u>22-24-282</u> French Drain Required: <u>Linear feet</u>	gallons free Behes
Authorized State Agent and S Machan the RS. Date 3-7-08	

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