HTE#	50-19295 RAHarnett	: County Department of Public H	lealth 20500
System Installer: Basement with plun Type of Water Spot System Type: (In accordance with	CALICH LOND D.C. CARTER Abing: Garage & Number of Bed Ary to 2 v.de charman Table V a)	Well Distance from well feet Types V and VI Systems expire in Owner must contact Health Department 6 months prior	5 years. r to expiration for permit renewal.
This system has been ins	talled in compliance with applicable North Carolina Gen	eral Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the	he Improvement Permit and Construction Authorization.
	5. ()	30R Repaire	Rea
PERMIT CONDITIONS: I. Performance: II. Monitoring: III. Maintenance: IV. Operation:	System shall perform in accordance with As required by Rule .1961. As required by Rule .1961. Other:		
V. Other:			
Following are the spe Type of system: Subsurface Drainage Field French Drain Required	No. of exact ditches of each		gallons Pump Tank: 100 gallons depth of feet ditches 13 inches
Authorized State A	gent_ Ja Wil	Date	02-25-29