HTE# 08 500-193071 R. Harnett County Department of Public Health 20254	
PERMIT # 24699 Operation Permit	
Name: (owner) Avincis Avincis Septic Tank   Repair Nitrification Line   Expansion      PROPERTY LOCATION:   1/2	
(In accordance with Table V a)  Owner must contact Health Department 6 months prior to expiration for permit renewal.	
Runn	2 Blycax
PERMIT CONDITIONS:  I. Performance: System shall perform in accordance with Rule .1961.  II. Monitoring: As required by Rule .1961.  III. Maintenance: As required by Rule .1961. Other:  Subsurface system operator required? Yes   If yes, see attached sheet for additional operation conditions, maintenance and reporting.  V. Other:  Following are the specifications for the sewage disposal system on the above captioned property.  Type of system:   Conventional  Other  Subsurface   Other   Subsurface Subsurface System on the above captioned property.  Septic Tank:  Septic Tank:  Septic Tank:  Subsurface  No. of  depth of  d	
Authorized State Agent  Date 78 26 28	