HTE# 08-500-19483 Harnett Co	ounty Department	of Public Healt	th 20126
PERMIT # <u>24663</u>	Operation Per	<u>mit</u>	
	New Installation PROPERTY LOCATION:	Septic Tank 🗀 Repair	Mitrification Line 🗆 Expansion
Name: (owner) Showcase	SUBDIVISION		: LOT # <u>\$2</u>
System Installer: O. S. Q. C. Number of Bedrooms  Basement with plumbing:   Garage Mumber of Bedrooms	Registration # _		Tran & sideline As
Type of Water Supply: Community Public Well	Distance from well	feet I VI Systems expire in 5 years	Shown by 0.37michla
(In accordance with Table V a)	Owner must contact Health Depa	rtment 6 months prior to exp	piration for permit renewal.
This system has been installed in compliance with applicable North Carolina General Sta	atutes, Rules for Sewage Treatment and Dispo	sal, and all conditions of the Improv	rement Permit and Construction Authorization.
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PERMIT CONDITIONS:			
<ol> <li>Performance: System shall perform in accordance with Rule .</li> <li>Monitoring: As required by Rule .1961.</li> </ol>	1961.		
III. Maintenance: As required by Rule .1961. Other:			
Drainage Field ditches of each dit	 ch feet	ditches fee	et ditches 1824 inches
French Drain Required: Linear feet			
Authorized State Agent	25	Data 05	. DQ · 0 K