	HTE# 08-50-198821 Harnett County Department of Public Health 20758	
	PERMIT # 2898 Operation Permit New Installation Septic Tank Repair Nitrification Line Expan	.cian
	Name: (owner) SUBDIVISION SUBDIVISION System Installer: Stand Garage Number of Bedrooms Type of Water Supply: Community PROPERTY LOCATION: SUBDIVISION SUBDIVISION SUBDIVISION WILL Subdivision # Registration # Feet	ISION
	System Type: Types 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 Authorization. Parel Disposal, and all conditions of the Improvement Permit and Construction Authorization.	
	Mrs. Care	
bad	Drive In'	
6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	to 21 Solar Mark	
	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 No If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
	V. Other:	
gen.	Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other Exact length of exact length width of depth of depth of each ditches Type of system: Septic Tank: Sep	ons
	Authorized State Agent Date 07.08-09	