HTE# 08.500-20035R Harnett County Department of Public Health 20233	
PERMIT # 24791 Operation Permit	
New Installation 🗷 Septic Tank 🗆 Repair 🔀 Nitrification Line 🗀 Expa	ansion
Name: (owner) Steve Jeanson SUBDIVISION Peasings H. LOT # 5/	ī —
System Installer: Text 300m Registration #	2
Basement with plumbing: Garage Mumber of Bedrooms	
Type of Water Supply: Community Public Well Distance from well feet 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.	
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PERMIT CONDITIONS: (2)	
1. 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 🗆 No 🔀	
If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation:	
V. Other:	
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other Other Other Other	allons
Subsurface No. of exact length width of depth of	
Drainage Field ditches of each ditch feet ditches feet ditches inches French Drain Required: Linear feet	\$
Authorized State Agent Date 09-17-08	