HTE# 08-5-	20299	Harnett Co	ounty Depar	rtment of Pu	blic Health	201	12
PERMIT # <u>24</u> 3	575		New Installa		ık 🗆 Repair 🗹 N	litrification Line	☐ Expansion
System Installer: _ Basement with plumb Type of Water Supply System Type: (In accordance with T	oing: Garage Gr: Gommunity TH-B Table V a)	Number of Bedrooms Public	SUBDIVIS Regiss Distance from well Owner must contact	Types V and VI Systems Health Department 6 m	expire in 5 years. onths prior to expiration f	or permit renewal.	# /00
TANKS +	Linest Filter 119/08 BM Romp, atom; see checked	0k		House House	222	nit and Construction Auth	prization.
PERMIT CONDITIONS: I. Performance: II. Monitoring: III. Maintenance: IV. Operation:	As required by Rule .1 As required by Rule .1 Subsurface system oper		lo 🗆	Kinsman Cl.			
/. Other: Following are the speci Type of system: □ is Subsurface Orainage Field French Drain Required:	No. of ditches4	disposal system on the a ther Lomp to exact length of each ditu Linear feet	EZFlow h	rty. Septic Tank: _ width of eet ditches	<u> </u>	ump Tank: <u>/ COO C</u> depth of ditches <u>/8</u>	gallons inches
Authorized State Ag	ent Luc	Muil.	5		Date //16/2	2009	