	HTE# <u>08 500-2048</u> SRR Harnet	tt County Department of Publ	lic Health 20401
	Name: (owner) Wyn Gny) System Installer: Cong Glb A Basement with plumbing: Garage Number of Be Type of Water Supply: Community Public System Type: Many Community Public (In accordance with Table V a)	Operation Permit New Installation Septic Tank PROPERTY LOCATION: 12 SUBDIVISION SUBDIVISION Registration # Independent Subdivision well Types V and VI Systems ex Owner must contact Health Department 6 month	Repair Nitrification Line Expansion The LOT # The prior to expiration for permit renewal.
	This system has been installed in compliance with applicable North Carolina G	ieneral Statutes, Rules for Sewage Treatment and Disposal, and all condit	^
	60.	12 11,	March & Alarm / Nacd's checking
A	1) 8///	(0)	
P	89/19/		
	3 4 8	?5	
	- CH 2931	5	
L	PERMIT CONDITIONS: I. Performance: System shall perform in accordance with the shall		
	V. Other:		
-	Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other Other		
	Authorized State Agent_ & LX		Date 12- 10-08