HTE# 09-500-21652

## Harnett County Department of Public Health

20586

PERMIT # 25363

Operation Permit

New Installation 🔀 Septic Tank 🗆 Repair 🖾 Nitrification Line 🗀 Expan	sion
PROPERTY LOCATION: 572 1/39	
101 # <u>01</u>	
System Installer: De Track and Registration #  Basement with plumbing: Garage A Number of Bedrooms	
Type of Water Supply:  Community Public  Well Distance from well  Feet	
System Type: 6-2 Flow Type: Y 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:	
I. Performance:       System shall perform in accordance with Rule .1961.         II. Monitoring:       As required by Rule .1961.         III. Maintenance:       As required by Rule .1961. Other:	
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 System on the above captioned property.  Septic Tank:  Ogallons Pump Tank:  gallons Pump Tank:  gallons Pump Tank:  feet ditches fe	ns
Authorized State Agent Date 05-04-09	