HTE# 09-5-2	Harnett County Department of Public Health	20788
PERMIT # 254	<u>Operation Permit</u>	
	New Installation X Septic Tank I Repair X Nitri PROPERTY LOCATION: LEMUEL BLACK RS	fication Line 🛛 Expansion
Nomes (assumes)	PROPERTY LOCATION: LEMUEL BLACK BO	
Name: (owner) <u></u> System Installer:	DC CANTER Registration #	LOT # <u>136</u>
Basement with plumb	0	
Type of Water Supply	y: 🗆 Community 🖄 Public 🗀 Well Distance from well <u>100</u> feet	
System Type: (In accordance with T		
(in accordance with I	Table V a) Owner must contact Health Department 6 months prior to expiration for p	ermit 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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	1 CONVENTIONAL / A	
	REPAIR	
	AVEA X	
	Solid Solid Solid	
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PERMIT CONDITIONS:	Summer shall and sum in the state of the state of the	J
I. Performance: II. Monitoring:	System shall perform in accordance with Rule .1961. As required by Rule .1961.	
III. Maintenance:	As required by Rule .1961. Other:	
	Subsurface system operator required? Yes 🗆 No 🗵	nerra Bullen de la ferra de la Bullen de La Bu
IV. Operation:	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
V. Other:		
Following are the specifications for the sewage disposal system on the above captioned property.		
Type of system: 🔲 🛛	Conventional & Other TIRE CHIPS Septic Tank: 1000 gallons Pump	Tank: gallons
Subsurface Drainage Field	No. of exact length width of dept ditches 1 of each ditch 240 feet ditches 3 feet ditch	h of
French Drain Required:		BELOW WATURAL
GAADE		
Authorized State Ag	gent Date 8/209	