HTE# 09-50	<u>್ಯ- ೨</u> ೩ \১\ Harnett County Department of Public Health 209	974
PERMIT # 25	Operation Permit	
	New Installation 🗗 Septic Tank 🗆 Repair 🖵 Nitrification Line	e 🗆 Expansion
	PROPERTY LOCATION: (12)	
Name: (owner)	HOM SUBDIVISION FORUTDAKI LO	IT # $\perp 32$
System Installer: _ Basement with plumb	E Registration # mbing: □ Garage ☑ Number of Bedrooms ♣ ᠘	
Type of Water Supply	ply: Community S Public Well Distance from well 100 feet	
System Type: (In accordance with T	E-7 Flow Types V and VI Systems expire in 5 years.	
(iii accordance with i	h 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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pour	Repair Aren Sú	
Pour-	(Kpan Aren)	
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PERMIT CONDITIONS:		
I. Performance:	· · ·	
II. Monitoring: III. Maintenance:	As required by Rule .1961. As required by Rule .1961. Other:	
	Subsurface system operator required? Yes 🗆 No 💢	Patrickerstone
IV. Operation:	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
iv. Operation.		
V. Other:		
Following are the spec	pecifications for the sewage disposal sys <u>t</u> em on the above captioned property.	
Type of system:	Conventional Souther E-2 FLOW Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface Drainage Field	No. of exact length width of depth of ditches 18-25	4 inch
French Drain Required:	ed: Linear feet Li	inches
	1 A Marie	<u> </u>
Authorized State Ag	Agent John Date 10 21 09	