HTE# 09-5-	22593 Harnett (	County Department of	Public Health	20720
PERMIT # 255	<del>8</del> 4	Operation Permit		
		New Installation Septic PROPERTY LOCATION:	Tank 🗆 Repair 🗗 N	itrification Line   Expansion
Name: (owner) _	Kerneth Cumings	SUBDIVISION Was	whire	LOT # 183
System Installer: _	OfficeFrickland	Registration #		
Basement with plumb Type of Water Supply				
System Type:	The second secon			
(In accordance with 1		Owner must contact Health Department	stems expire in 5 years. 6 months prior to expiration fo	or permit renewal.
This system has been insta	lled in compliance with applicable North Carolina General	statutes, Rules for Sewage Treatment and Disposal, and	all conditions of the Improvement Perm	nit and Construction Authorization
			an estation of the importance retain	nt and construction Additionization.
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BM 10/16	ladog Line, + theoline OK	l a k	i	
*TANK,	Line, + the line OK	Cruly 1 36	· l	
	power ver. f. ed		'	
* heeds	passer ver. F. ea			
PERMIT CONDITIONS:				
I. Performance:	System shall perform in accordance with Rule	Wood pointe à	'^	
II. Monitoring:	As required by Rule .1961.			
III. Maintenance:	As required by Rule .1961. Other:			
	Subsurface system operator required? Yes			
IV. Operation:	If yes, see attached sheet for additional opera	ition conditions, maintenance and reporting.		
operation.				
V. Other:				
Following are the speci	ifications for the sewage disposal system on the	ahove cantioned property		
Type of system:	Conventional Dother E2 Flo	Septic Ta	ınk: 1000 gallons Pu	ımp Tank: gallons
Subsurface	No. of exact leng	rth width	ı of d	lepth of
Drainage Field French Drain Required:		itch <u>150</u> feet ditche	es feet d	litches 36-18 inches

Authorized State Agent, Super McLing REHS

Date \_/G /2//2609