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HTE# 09.5-2275 Harnett C	ounty Department of Public Health 21274
PERMIT # 15-777	
	Operation Permit   ■ New Installation ■ Septic Tank □ Repair ■ Nitrification Line □ Expansion   PROPERTY LOCATION: □
Name: (owner) H+H Construction	$\square$ SUDDIVISION FOREST CARE INT $\square$ INT $\square$ 17.2
System Installer: <u>CH+:5557-:ck/n.l</u> Basement with plumbing: Garage De Number of Bedrooms	Registration #
Type of Water Supply: 🗆 Community 🖬 Public 🔲 Well	Distance from well feet
System Type: <b>711</b> G	Types V and VI Systems expire in 5 years. 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 St	tatutes, 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:	
Subsurface system operator required? Yes 🗔 N	
If yes, see attached sheet for additional operati IV. Operation:	on conditions, maintenance and reporting.
/. Other:	
Following are the specifications for the sewage disposal system on the a	above captioned property.
Type of system: $\Box$ Conventional $\Box$ Other $\underline{FZFIc}$	Septic Tank: <u>/CCO</u> gallons Pump Tank: gallons
Dubsurface No. of exact length Drainage Field ditches <u>2</u> of each ditc French Drain Required: Linear feet	h 65 feet ditches 7 feet ditches 18-30 inches
Authorized State Agent Sun Min (	PEHS Du 2/15/11/1
	Date 2 115/2010