Authorized State Agent\_

Harnett County Department of Public Health 2116	5.5
PERMIT # 25599  Operation Permit	
New Installation	~, <b>.</b>
PROPERTY TOTALION: Advant V & C	⊥ Expansı
Maine (Owner) SUBDIVISION FORCE FORCE	7
system installer: Kandy Satten Registration #	·
Trace of Water Control	
System Type:	
(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 Authorize	ation.
50'	
50' Easement	
Lagencar	
PONE /	
House Ma	
as stre	
14 27	
DR A A A A A A A A A A A A A A A A A A A	
DR T	
3 46 \ \ 36'	
Light policy 124	
PERMIT CONDITIONS:	
1. 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  No  If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:/ /	
1/21/2010 BM	
V. Other: * TANK, Lines, D-Box OK * Needs water & Power Lines Check	od
Following are the specifications for the sewage disposal system on the above captioned property.	
Type of system: Li Conventional W Other William her Sentic Table 1000	
Subsurface No. of exact length width of denth of	gallons
of each ditch 10 feet ditches 3 feet ditches 24	inches
rrench Drain Required: Sinear feet untiles XY	

REHS

Date