HTE# <u>19-5- 23172</u>	Harnett County Department of Public Health 209	17
PERMIT # 25703	<u>Operation Permit</u>	
	New Installation Septic Tank Repair Nitrification Line PROPERTY LOCATION: Set 2003 The Long 6 20	Expansion
Name: (owner) <u>Jonathon Cee 7</u>	Untrig ton SUBDIVISION Johnny Tuckengton LOT	#
Charles Charles	umber of Bedrooms 4	
Type of Water Supply: 🗌 Community 💽 Pi	ublic 🗹 Well Distance from well 100 ' + feet	
System Type: <u>25% REDUCTO_ Sys Ha</u> (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 N	oth Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Auth	rization.
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DAMEN CENTE 3	Power	
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The request .		
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5R 2003 Maland RD		
PERMIT CONDITIONS:		
I. Performance: System shall perform in accu II. Monitoring: As required by Rule .1961.	ordance with Rule .1961.	
III. Maintenance: As required by Rule .1961.		
Subsurface system operator in If yes see attached sheet fo	required? Yes 🗆 No 🗔 r additional operation conditions, maintenance and reporting.	
IV. Operation:	automonal operation conditions, manitenance and reporting.	
V. Other:		
Following are the specifications for the sewage disposal system on the above captioned property.		
Type of system: 🗌 Conventional 🛛 🗹 Other	25% REDUCTION System Septic Tank: _1200 gallons Pump Tank:	gallons
Subsurface No. of Drainage Field ditches <u>2</u>	exact length / width of depth of of each ditch <u>140</u> feet ditches <u>3</u> feet ditches <u>18-3</u> /8	inches
	inear feet	INCINES
Authorized State Agent_ and	Monhautona Date 3-25-10	
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