ਜਾਵ# <u>10-5-23-8</u> ਪਤ Harnett County Department of Public Health
PERMIT # 25922 Operation Permit 21992
New Installation Septic Tank Nitrification Line Repair Expansi PROPERTY LOCATION: S. R. SGAN CHURCH RD Name: (owner) Joe Diaz SUBDIVISION MCLEOD LOT # 7 System Installer: Bill Harm Registration # Registration # Type of Water Supply: Garage Number of Bedrooms Housing: Type of Water Supply: Community Public Well Distance from well 100 feet System Type: 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 Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. REGENICE ROBERT RUSE DRIVE
PERMIT CONDITIONS: Performance: System shall perform in accordance with Rule .1961. Monitoring: As required by Rule .1961. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes \(\square \) No \(\square \) If yes, see attached sheet for additional operation conditions, maintenance and reporting.
V. Operation:
. Other:
□D-Box □Pump □Alarm □H20Line □PWR Li
ollowing are the specifications for the sewage disposal system on the above captioned property. ype of system: Conventional Other Septic Tank: 1000 gallons Pump Tank: gallons ubsurface No. of exact length width of depth of depth of or deach ditches of each ditch 400 feet ditches feet ditches feet ditches 20-36 inches rench Drain Required:

Authorized State Agent_