HTE#10-573	Harnett County Department of Public Health	
PERMIT # 25°	0 Operation Permit 215	99
	New Installation Septic Tank Mitrification Line Repair	☐ Expansion
	PROPERTY LOCATION: POMOROGE TO ALL	
Name: (owner)		74
System Installer: _ Basement with plumb		
Type of Water Supply		
System Type:	Types V and VI Systems expire in 5 years.	
(In accordance with 1	Table V a)  Owner must contact Health Department 6 months prior to expiration for permit renewal.	
This system has been insta	alled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authoriza	ation.
	TONVERT.  SEPANO  REPAIR  SOCK  ANTIQUE C.  ANTIQUE C.	
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:	
IV. Operation:	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
V. Other:		
		PWR Line
Following are the spec	ifications for the sewage disposal system on the above captioned property.	LIIIG
Type of system:	Conventional Other CHAMBER (QUICLE H) Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface Drainage Field	No. of exact length width of depth of ditches $3$ of each ditch $50$ feet ditches $3$ feet ditches $3$	in abo-
French Drain Required:	of each order area diffues 1 lest diffues 4.1.50	_ inches
	The state of the s	

Authorized State Agent

Date 8 24 10