HTE# 10-5-24503

Harnett County Department of Public Health Operation Permit 21520

DEBMIT	ш	26107
PERMIT	#	20101

New Installation 🔀 Septic Tank 🗆 Repair 🔀 Nitrification Line 🗀 Expansi	ion
PROPERTY LOCATION: Micao Jones Ro	011
Name: (owner) STANCIL BUILDERS SUBDIVISION PATTONS POINT LOT # 165	
System Installer: Stancil Registration #	
Basement with plumbing: Garage K Number of Bedrooms 3	
Type of Water Supply: Community Dublic Well Distance from well 100 feet	
System Type:	
(In accordance with Table Y 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 Authorization.	
PUMP CONV. REPAIR AREA 130 HOUSE RELIANT HOUSE 131	
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule .1961.	
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 No 🗵	
If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:	
V. Other:	
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Conven	S
Authorized State Agent Date 7 15 10	