HTE#10-5-25	<del>305</del>	Harnett Coun	ty Departm	ent of Public	Health	
PERMIT # 262	16	×	Operation New Installation	Permit	〔 Nitrification Line □	21866 Repair □ Expansion
Name: (owner)	Nynn Cons	TRUCTION INC	SUBDIVISION	SUMMER H	1177	LOT # <u>~3 \</u>
		PLUMBINC				
Basement with plumbing	, .	Number of Bedrooms <u>3</u>				
	☐ Community ☑		ance from well\C	es V and VI Systems expire	in E years	
System Type: (In accordance with Tab	le V a)				orior to expiration for permit	renewal.
•	·					
This system has been installed	in compliance with applicable		Aules for Sewage Treatment	and Disposal, and all conditions	of the Improvement Permit and Con	struction Authorization.
		157	and the second s	`		
	138	453° A 40° A	D & ->C	187		
		OAK LE	at doine			
PERMIT CONDITIONS: I. Performance: II. Monitoring: III. Maintenance:	As required by Rule .196 As required by Rule .196 Subsurface system opera	61. Other: tor required? Yes 🗆 No 🔀	(	ce and reporting.		
If yes, see attached sheet for additional operation conditions, maintenance and reporting.  U. Operation:						<del></del>
V. Other:						
	D-Box □	Pump 🗆		Alarm 🗆	H20Line □	PWR Lin
		lisposal system on the abov				
Type of system:	Conventional X Otl	ner Prome To E	Z Frow	Septic Tank: 100	<u>ූල</u> gallons Pump Tar	
Subsurface	No. of	exact length	٠ ٩٠	width of	depth o	i 6550
Drainage Field	ditches 3	of each ditch _	60 feet	ditches3_	teet ditches	18-30 inches
French Drain Required:		Linear feet				

Authorized State Agent\_

Date 1)5/11