HTE	#11-5-3	15967	Harnett Co	unty Depart	tment of Pu	blic Health	:	
PERMIT # 26470				Operation Permit				21950
			`	New Installati PROPERTY L	on 😾 Septic Tar	ık 🕱 Nitrificat	ion Line 🗆 🛭	Repair 🗆 Expansion
Nan	ne: (owner) _	BILL CLAR			ON CAROL	NA OAKS	r	LOT # <u>5</u> 4
	em Installer: _			Registi	ration #	eritativa anti ta distributativa anti area		
	ment with plumb		Number of Bedrooms _ Public	Distance from well _	\ o o feet			
Syste	em Type:		7 G		Types V and VI Systems	•		
(In a	accordance with 1	Table V a)		Owner must contact	Health Department 6 m	onths prior to expira	ition for permit rer	newal.
This s	ystem has been insta	alled in compliance with applicab	le North Carolina General Stati	utes, Rules for Sewage Treat	ment and Disposal, and all c	onditions of the Improvem	ent Permit and Constru	ction Authorization.
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			30	DEATHACE E	ADEMEN!	1		
		+	15' SETB	ACKI				
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			CARRIVA	- DEPA'Z	7 11 1			
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_	1IT CONDITIONS:			10/1				
I. II.	Performance: Monitoring:	As required by Rule .19	accordance with Rule .	1961.				
III.	Maintenance:	As required by Rule .15	961. Other:					
			ator required? Yes 🗆 N					
IV.	Operation:	If yes, see attached she	eet for additional operati	on conditions, mainter	nance and reporting.			
.,.	operation.							
٧.	Other:							
_ 		D-Box		□	Alarm 🗆	H20	Line 🗆	PWR Lin
	wing are the spe of system: \square	cifications for the sewage Conventional 🔀 0	disposal system on the a	above captioned prope - (Qui	rty. Septic Tank:	1000	illons Pump Tank: _	gallons
, .	urface	No. of	exact lengtl	1	width of	8	depth of	
Drain	age Field	ditches	_ of each dit	ch <u>165 </u>	eet ditches _	feet	ditches _ Č	inches

Drainage Field French Drain Required:

Authorized State Agent_

Date 5C