HTE#_11~5~	Harnett County Department of Public Health	
PERMIT # <u>26</u>	· ^ · · - · ·	22718
	New Installation 図 Septic Tank 図 Nitrification Line □ PROPERTY LOCATION: NCみつら	
	GARY ROBINSON HOMES SUBDIVISION GWEN DAKS	LOT # <u>50</u>
	Registration #	
Basement with plum Type of Water Suppl	lbing: □ Garage ⊠ Number of Bedrooms <u>3</u> ly: □ Community ☑ Public □ Well Distance from well <u>100</u> feet	
System Type:	Types V and VI Systems expire in 5 years.	
(In accordance with	Table V a) Owner must contact Health Department 6 months prior to expiration for permit	renewal.
This system has been inst	talled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Coi	astruction Authorization.
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	REPAIR	
	AREA HOUSE 11	
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PERMIT CONDITIONS:		
I. Performance:	System shall perform in accordance with Rule .1961.	
II. Monitoring: III. Maintenance:	As required by Rule .1961. As required by Rule .1961. Other:	
m. namediance.	Subsurface system operator required? Yes \(\square\) No \(\square\)	
n. o :	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
	D-Box Pump Alarm H20Line	PWR Lin
	cifications for the sewage disposal system on the above captioned property.	
Type of system: Subsurface		
ouosuriace Orainage Field	No. of exact length width of depth of ditches feet ditches feet ditches	. 57
rench Drain Required		11121133

Authorized State Agent_

Date 11)15