HTE#	12-	5-	5830	9
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Harnett County Department of Public Health

PERMIT # 2690C)	Operation Peri	mit	22	432
		New Installation 🔀 S	Septic Tank 📈 Nitri	fication Line 🔲 Repai	ir 🗆 Expansion
		PROPERTY LOCATION:_	BROWN B	•	·
Name: (owner)	oss Homebuilders	SUBDIVISION Ga	ANDE PINES	L0	T# <u>\$</u>
System Installer:	HOENHOL JUHN	Registration # _			
Basement with plumbing:					
Type of Water Supply: System Type:	Community Public Well	Distance from well	feet I VI Systems expire in 5 yea	arr	
(In accordance with Table	V a)	Owner must contact Health Depar			
	,	'	ı	,,	
This system has been installed in	compliance with applicable North Carolina General State	utes, Rules for Sewage Treatment and Dispo	isal, and all conditions of the Imp	rovement Permit and Construction A	uthorization.
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			148		
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		nic an			
		HOUSE			
	5'				
	Resmo /				
	AREA	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \			
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	CARSON	CT			
PERMIT CONDITIONS:					
	tem shall perform in accordance with Rule .	1961.			
	required by Rule .1961.				
III. Maintenance: As	required by Rule .1961. Other:	\checkmark			
Su If	osurface system operator required? Yes \Box Nyyes, see attached sheet for additional operat	on conditions maintenance and re	norting		
IV. Operation:	703, 300 accessed sheet for additional operation	on conditions, maintenance and re	porting.		
V. Other:					
				H20Line 🗆	PWR Line
	ions for the sewage disposal system on the rentional Other <u>F</u> Zテレの		South Toute 1000		
Type of system: Con Subsurface No	of exact lengt		width of	gallons Pump Tank: depth of	gallons
The state of the s	· · · · · · · · · · · · · · · · · · ·	ch <u> </u>	ditches 3	feet ditches 18-2	inches
French Drain Required:	Linear feet				
-	Mille			1 _	
Authorized State Agent	M WALL	REMS	Date & _	14/2	