HTE#	* Contract	2	-5-	28	659	12
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Harnett County Department of Public Health

PERMIT #15	Operation Permit	22446
	🛛 New Installation 🖂 Septic Tank 🖼 Nitrification Line 🗆	Repair Expansion
	PROPERTY LOCATION: HORNE La	
Name: (owner)		LOT # <u>6</u>
System Installer:		
Type of Water Supply:		
System Type:	Types V and VI Systems expire in 5 years.	
(In accordance with Ta	able V a) Owner must contact Health Department 6 months prior to expiration for permit r	enewai.
This system has been install	ed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Consti	ruction Authorization.
PERMIT CONDITIONS:	REDENIA HOUSE	
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. Hamemanec.	Subsurface system operator required? Yes 🗆 No 🕱	***************************************
IV. Operation:	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
iv. Operation.		
V. Other:		
	D-Box	PWR Line
Following are the spec Type of system:	ifications for the sewage disposal system on the above captioned property. Conventional 図 Other <u>Cいるのをこれ</u> Septic Tank: 1000 gallons Pump Tank	gallons
Subsurface	No. of exact length width of depth of	•
Drainage Field French Drain Required:	THE COLUMN TWO IS NOT	3C-27 inches
Stati negaticu.		
Authorized State Ag	gent Date 9612	