HTE# 12-5-28833

Harnett County Department of Public Health

PERMIT # 268	96 Operation	n Permit	22610
TEMIN # _ A D D	New Installation	Septic Tank 🖃 Nitrification Line 🛚	☐ Repair ☐ Expansion
	DDODEDTY IOC	CATION: Balland Rf	
Name: (owner)		Hadden Soint	LOT # _ /
System Installer:		tion #	
Basement with plumbing	The state of the s	100 feet +	
Type of Water Supply: System Type:		rpes V and VI Systems expire in 5 years.	
(In accordance with Tab	le V a Owner must contact He	ealth Department 6 months prior to expiration for perm	nit renewal.
This system has been installed	in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatmer	nt and Disposal, and all conditions of the Improvement Permit and	Construction Authorization.
	25% Rude What A H A Parely	the died of water	
	ROTO Ballod No COA	indher Di.	
PERMIT CONDITIONS:	E- TO BALLET IN E ON		
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:		
III. Maintenance:	Subsurface system operator required? Yes No No		-
	If yes, see attached sheet for additional operation conditions, maintena	ance and reporting.	
IV. Operation:			
V. Other:			14/40
1 Zull	Pump 🗆	Alarm & H20Line &	PWR Line
Following are the speci Type of system: Subsurface Drainage Field	Ronce the sewage disposal system on the above captioned propert Conventional Other Exact length of each ditch	Septic Tank: $POOD$ gallons Pump width of Q depti	Tank: gallons h of finches
French Drain Required:		,	
	Abl U. Bul RE. H	-5- 11/20/	/ /2