HTE# 12-5.28956

Harnett County Department of Public Health

III. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes No	IIIE# 10 D. A.	13	ounce, a opinion on a similar		22/17
Name: (owner) South Homes C. SUBDIVISION Keel and Forence Lot # 18 Subsense the planshing: Garage Number of Befroom Page of Water Supply Community Public Well Distance from well Do feet Type of Water Supply Community Public Well Distance from well Subsense expire in 5 year. In accordance with Table Y a) Owner must contact Health Department of months prior to explanation for permit renewal. No yearn has been incalled in compliance with applicable florth Carolina Germani Susana, John for Scory Ingenne and Osporul, and all conditions of the Improvement Permit and Communication. PERMIT COMDITIONS: Performance: No No No	PERMIT # 276	53_	Operation Permit	_	
Name: (owner) South Mones I C SUBDIVISION KELL FARMS LOT # 18 System Installer: Howards Supply Monther of Betroman United System Type: (amounting Cares Monther of Betroman United System Type: (amounting Cares Monther of Betroman United System Type: (bit accordance with Table V a) Donce must centact Health Department 6 months prior to expiration for permit renewal.			New Installation Septic Tank	Nitrification Line	Repair Expansion
System Installer Heach SERT C Registration #		- 1)			107 # 10
PERMIT CONDITIONS: Permit Continues Carage Number of Bedrooms Well Distance from well Do 6et Types V and W Systems expire in 5 years.					L01 # _1%
PERMIT CONDITIONS: I. Performance: I.					
Types V and VI System: expire in 5 years.					
Downer must contact Health Department & months prior to expiration for permit renewal.		Community 22 rushe 2 rush	Types V and VI Systems exp	•	
PERMIT CONDITIONS: I. Performance: II. Mointering: III. Maintenance: As required by Nature 1961. Other: V. Other: D-Box Pump Pump Alorm H20Lino PWR Line Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Substurface No. of Conventional		ole V a)	Owner must contact Health Department 6 months	s prior to expiration for permit	renewal.
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PERMIT CONDITIONS: 1. Performance: 1. Performance: 2. System shall perform in accordance with Rule 1961. 1. Monitoring: 1. Monitoring: 1. Maintenance: 2. Subartace system operator required? Yes No. N			MILE 192		
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