HTE# 12.5.29552 Harnett County Department of Public Health 232	54
PERMIT # Operation Permit	J T
PERMIT # _27/30       Operation Permit         Image: Marked With Septic Tank Image: Septic Tank Im	$\Box$ Expansion
Name: (owner) Timethy J. Owen SUBDIVISION _ Jessie Byrd LOT	#
System Installer:AAA_AJ Registration #	π
Basement with plumbing: 🗆 Garage 🗆 Number of Bedrooms 🔜 🛩	
Type of Water Supply: 🗆 Community 🗹 Public 🗆 Well Distance from well feet System Type: feet	
(In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal.	
This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Auth	orization.
Byrd DRIVE	
TO BUNG DRIVE	
Hosse -	
Repair Area T-1	
I Aven	
50	
Permit CONDITIONS:	
I. Performance: System shall perform in accordance with Rule .1961.	
II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes 🗆 No 🗹	—
If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation:	
	_
V. Other:	 PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.	I III LIIIC
Type of system: 🗆 Conventional 🗹 Other Quick of Chamber Septic Tank: _/000 gallons Pump Tank:	gallons
Subsurface No. of exact length width of depth of Drainage Field ditches $290$ feet ditches $24$	inches
French Drain Required: Linear feet	
All and all	
Authorized State Agent Suger Mc Sosing REAS Date Date 9/4/2014	