HTE# 12-5-3621	Harnett County Department of Public Health	
PERMIT # <u>2723</u> 1	Operation Permit 22985	>
		xpansion
Name: (owner) $\widehat{\mathcal{L}}$	PROPERTY LOCATION: ST. 1437 Bolland RD  Bradley Built IDC SUBDIVISION / Hadden PT LOT # 5  Starce on lo Registration #	?9
System Installer:	STANCE Solution # Registration #	
Basement with plumbing: Type of Water Supply: [	□ Community □ Public □ Well Distance from well feet	
System Type: 25% 2 (In accordance with Table	12 Types V and VI Systems expire in 5 years.  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 Authorization.		
This system has been installed i	9, 1	
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	8 723'	
	18 tark	
	12'	
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	SEP PIL	
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	Hadlardway	
PERMIT CONDITIONS:  I. Performance: S	System shall perform in accordance with Rule .1961.	
II. Monitoring: A	As required by Rule .1961.	
	As required by Rule .1961. Other:	
IV. Operation: _	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
' -		
V. Other: _	D.D	DWD L:
	_ D-Box	_ PWR Line
Type of system:   Co	onventional Other 25% Raidu va Sys Lan Septic Tank: 1000 gallons Pump Tank:	_ gallons
	No. of exact length width of depth of ditches 3 feet ditches 26-31 is	nches
French Drain Required: _	Linear feet	
Authorized State Ager	Date 10-14-13	