## Harnett County Department of Public Health

HTE# <u>10-&gt;</u>	-105076 nameti County Department of Public Healt	.11
PERMIT #	357 Operation Permit	22971
	✓ New Installation ✓ Septic Tank ✓ Nitrific	ation Line 🗆 Repair 🗆 Expansion
	PROPERTY LOCATION: 37/1802 CANE RA	<b>\</b>
Name: (owner)	MILTOn Enleapnois ENC SUBDIVISION WADE PT	LOT # _ <u></u> _
System Installer: Basement with pluml		
Type of Water Suppl	ly: 🗆 Community 🗹 Public 🗆 Well Distance from well feet	
System Type: 252	Tolk Val	
(In accordance with	Table V a)  Owner must contact Health Department 6 months prior to exp	iration for permit renewal.
This system has been instr	talled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improv	ement Permit and Construction Authorization.
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PERMIT CONDITIONS:	<u> </u>	Made and the second
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:	the said of the sa
	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
	D-Box 🗆 Pump 🗆 Alarm 🗆 H2	20Line □ PWR Line
Following are the spe	cifications for the sewage disposal system on the above captioned property.	.ound aI MX LIN
Type of system: $\Box$	Conventional Other 25% Republic Septic Tank: 1000	gallons Pump Tank: gallons
Subsurface Drainage Field	No. of exact length width of ditches feet ditches feet	depth of et ditches 24 inches
French Drain Required	diethes terminated the diethes terminated te	et ditches inches
	- 3 M , L-	0
Authorized State A	gent 2 Mahrt Date	8-23-13
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