11114 12-5-30598

Authorized State Agent_

Harnett County Department of Public Health

HTE# 15-3-300 18 namett C	ounty Department of Public Health	
PERMIT # <u>27273</u>	Operation Permit	22864
	New Installation Septic Tank Nitrification Line PROPERTY LOCATION:	□ Repair □ Expansion
Name: (owner) McKEE Homes	SUBDIVISION OAKMONT	LOT # 143
System Installer: <u>Eooc</u>	Registration #	
Basement with plumbing: Garage Number of Bedroom		
Type of Water Supply: Community Public Well		
System Type:	Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for per	mit rangual
(in accordance man rasic + a)	owner must contact health bepartment o months prior to expiration for per	int renewal.
This system has been installed in compliance with applicable North Carolina General S	tatutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and	Construction Authorization.
.	100	
187	REPAIR AREA HOUSE BISON IN	
PERMIT CONDITIONS:	- 0000 pm	Photos view
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	N. XI	
If yes, see attached sheet for additional operation		
IV. Operation:	and reporting.	
V. Other:		
□ D-Box □ Pump		PWR Line
Following are the specifications for the sewage disposal system on the Type of system: Conventional Other Conv	Septic Tank: 1000 gallons Pump T	ank: gallons of s_36-)8 inches
French Drain Required: Linear feet		
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Date 5/5