HTE#_13-5-30851 Harnett County Department of Public Health								
PERMIT # 2734\ Operation Permit 22823								
New Installation 🔀 Septic Tank 👿 Nitrification Line 🗆 Repair 🗀 Expansion								
Name: (owner) WYNN CONSTAUTION SUBDIVISION TRESTERS RIOCE LOT # 68								
System Installer: Thorrows PLUMBING Registration #								
Basement with plumbing: Garage Number of Bedrooms								
System Type: Types V and VI Systems expire in 5 years.								
(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 Authorization.								
132								
169 House								
170								
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\								

				D8-757					
PERM	IT CONDITIONS:								,
l.	Performance:	System shall perform in a	ccordance with Rule .1961.						
II.	Monitoring:	As required by Rule .196							
III.	Maintenance:	As required by Rule .196							
		Subsurface system operato	or required? Yes 🗆 No 🗵 🗆						
		If yes, see attached sheet	for additional operation condi	itions, maintenance	and reporting.				
IV.	Operation:								-
٧.	Other:						-		
		D-Box 🗆	Pump 🗆		Alarm 🗆	····	_ H20Line		PWR Line
Follow	ing are the spec	ifications for the sewage di	sposal system on the above ca	ptioned property.					
Type	of system: \Box	Conventional 🗷 Othe	EZ FLOW				gallons	Pump Tank:	gallons
Subsu	rface	No. of	exact length	_	width of	~		depth of	
	age Fi <u>eld</u>	ditches	$\frac{\text{exact length}}{\text{of each ditch}}$	O feet	ditches _	_ <u>3</u>	_ feet	ditches	inches
Frencl	n Drain Required		Linear feet						
Auth	orized State A	gent		REMS		Date	18/13	5	
	* *************************************								