HTE#_13-5-3	Harnett County Department of Public Health 23124
PERMIT # _ 2765	
·	New Installation Septic Tank Nitrification Line Repair Expansion PROPERTY LOCATION: MARKS RO
Names (assumers)	
Name: (owner) System Installer:	
Basement with plumbin	
Type of Water Supply:	
System Type:	Types V and VI Systems expire in 5 years.
(In accordance with Tal	ble V a)  Owner must contact Health Department 6 months prior to expiration for permit renewal.
This system has been installe	d in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
, in specimen as seen means	
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	10'
	150
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	18 / / 201 HOUSE
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	AREA 1
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PERMIT CONDITIONS:	
I. Performance:	System shall perform in accordance with Rule .1961.
II. Monitoring:	As required by Rule .1961. Other:
III. Maintenance:	Subsurface system operator required? Yes $\square$ No
	If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:	
V. Other:	· · · · · · · · · · · · · · · · · · ·
	D-Box
	ifications for the sewage disposal system on the above captioned property.
Type of system:	Conventional Other CHAMBER (GHY) Septic Tank: 1800 gallons Pump Tank: gallons
Subsurface	No. of exact length width of depth of
Drainage Field	
French Drain Required:	linear feet

Authorized State Agent\_