HTE# 13-5-31	Harnett County Department of Public Health	
PERMIT # 2756		2997
1 EMIN #	<u>Operation Permit</u> 2 ✓ New Installation ✓ Septic Tank ✓ Nitrification Line ✓ Re	pair 🗆 Expansion
	PROPERTY LOCATION: 321415 Rawls CH-RA	
Name: (owner)		LOT # <u>/O</u>
	Fish Brothers Registration #	
Basement with plumbin		
Type of Water Supply:	Community Public Well Distance from well feet	
(In accordance with Tal	to 25% Reduction System Type II B - EZIAN Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit rene	wal.
(in accordance with the	(a) (a) (b) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	
This system has been installe	ed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction	on Authorization.
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	Pup to 2595 1BN 96	
	2835 (105)	
	repair	
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PERMIT CONDITIONS:	,	
I. Performance: II. Monitoring:	System shall perform in accordance with Rule .1961. As required by Rule .1961.	
III. Maintenance:	As required by Rule .1961. Other:	
	Subsurface system operator required? Yes \square No \square	
W 0	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		

3 g_D 3 24 ditches _ ditches _ inches Drainage Field ditches of each ditch feet feet French Drain Required: Linear feet 10-30-13 Date Authorized State Agent

Pump 🗆 _

exact length

1 Other Pump to 25 % REDUCT

Subsurface

D-Box

No. of

Type of system: \square Conventional

Following are the specifications for the sewage disposal system on the above captioned property.

Alarm 🗆

Septic Tank: 1000

width of

H20Line □

depth of

PWR Line

gallons