HTE# 13-8	31953	Harnett County	Department of Pu	blic Health	
PERMIT # 2753	3	•	Operation Permit		23012
			w Installation 🗹 Septic Tar		
	0 1 1110	P	ROPERTY LOCATION: <u>32.194</u>		· KD
Name: (owner)		es soci	SUBDIVISION Recent	CL STATUL	LOT # <i>i</i> O
System Installer: _		Number of Bedrooms 3	Registration #		
Basement with plumb	•	/········	from well feet		
Type of Water Supply	Ze NEDVIN	= 1 A / + 00 TT 6	Types V and VI System	expire in 5 years	
(In accordance with T		Cun Owner in	pust contact Health Department 6 m	onths prior to expiration for permi	t renewal.
`	,	18/1 red 4	Mary 1	. , ,	
This system has been instal	lled in compliance with applicabl	North Carolina General Statutes, Rules i	or Sewage Treatment and Disposal, and all c	onditions of the Improvement Permit and Co	onstruction Authorization.
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PERMIT CONDITIONS:		<i>9</i> 1			
I. Performance:		accordance with Rule .1961.			
II. Monitoring:	As required by Rule .19				
III. Maintenance:		tor required? Yes 🗆 No 🗆		· · · · · · · · · · · · · · · · · · ·	
		et for additional operation condit	ons, maintenance and reporting.		
IV. Operation:					· · · · · · · · · · · · · · · · · · ·
Y. Other:	n.,				
П		Pump □		H20Line □	PWR Lin
				IIZULIIIE 🗀 _	FWK LIN
Type of system:	Conventional	lisposal system on the above cap	Septic Tank:	/ OOB gallons Pilmo Ta	nk: gallons
Subsurface	No. of	exact length 30	width of	depth of	of
Drainage Field	ditches	of each ditch		<7	
French Drain Required		Linear feet			

- EMpht

Authorized State Agent