HTE#_/3-5-32	Harnett County Department of Public Health	
PERMIT # 2757	22900	
	✓ New Installation ✓ Septic Tank ✓ Nitrification Line ☐ Repair ☐ Exp	ansion
	PROPERTY LOCATION: 5/44/ Chalybrate Springs CD Comfort Homes INC SUBDIVISION Menchells Hyrins LOT # 4	,
Name: (owner)(Confort Homes INC SUBDIVISION Mended STATIONS LOT # 9	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
System Installer: Basement with plumbing		
Type of Water Supply:	☐ Community ☐ Public ☐ Well Distance from well feet	
(In accordance with Tab	ble V a) Twift the Aveky Owner must contact Health Department 6 months prior to expiration for permit renewal.	
This must be here installed	Characher ' and in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.	
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PERMIT CONDITIONS:		
I. Performance:	System shall perform in accordance with Rule .1961.	
II. Monitoring: III. Maintenance:	As required by Rule .1961. As required by Rule .1961. Other:	
	Subsurface system operator required? Yes \(\sime\) No \(\sime\) If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:	- yes, see attached sheet for additional operation conditions, maintenance and reporting.	
V. Other:		
	D-Box	PWR Line
	ifications for the sewage disposal system on the above captioned property.	
Type of system: (Conventional Other 75% 1763UCTUD System Septic Tank: 1000 gallons Pump Tank: 1000 No. of exact length width of depth of	gallons
Drainage Field	ditches 2 of each ditch 100 feet ditches 5 feet ditches $30-18$ inc	ches
French Drain Required:	Linear feet	
Authorized State Ag	nont on 5 Marks to Date 12-3-13	