HTE# <u>14-5-3285</u>	<u>SI</u> Harnett	County Departn	nent of Public Hea	lth 2320	Л
PERMIT # _2772	6_	<u>Operation</u>	<u>Permit</u>		
		New Installation	🛛 Septic Tank 🖉 Nitri	fication Line 🗆 Repair 🗆	Expansion
Nama: (aurar)	stort Homes Toic	PROPERTY LOC	ATION SU 449 ATTANS		43
System Installer: <u>Ro</u>	15sell PKitho	Registrat	ion #		
Basement with plumbing:	🗆 🛛 Garage 🗹 Number of Bedro	ooms <u>3</u>			
System Type: 25% REALTRON System TypeIII & Acomp Types V and VI Systems expire in 5 years.					
(In accordance with Table V a) Quere must contact Health Department 6 months prior to expiration for permit renewal. QUER M CHANBER					
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.					
	2 th	IN POP	Porece Hearle		
PERMIT CONDITIONS: I. Performance: Sys	stem shall perform in accordance with	Rule .1961.			
	required by Rule .1961. required by Rule .1961. Other:				
Su	bsurface system operator required? Yes yes, see attached sheet for additional	🗆 No 🗖	nce and reporting.		
IV. Operation:		,, ,	10.		
V. Other:			· · · · · · · · · · · · · · · · · · ·		
		mp 🗆		_H20Line 🗆	PWR Line
Following are the specification Type of system: Converse		DULTUR Syster QUE	Septic Tank: 1000	gallons Pump Tank:	gallons
		t length / ach ditch <u>80</u> feet	width of	depth of feet ditches <u>30->18</u>	inches
French Drain Required:	Linear feet				
Authorized State Agent Jone & Marhoute Date 5-15-19					
9 <u></u>	0				<u> </u>