HTE# 14-5-33568 Harnett County Department of Public Health PERMIT # 27947 Operation Permit	23268
✓ New Installation ✓ Septic Tank ✓ Nitrification PROPERTY LOCATION: <u>Basement with plumbing:</u> <u>Garage</u> Number of Bedrooms <u>SUBDIVISION</u> <u>Basement with plumbing:</u> Type of Water Supply: Community <u>Public</u> Well Distance from well <u>Songet</u> System Type: <u>HL</u> <u>Basement</u> <u>Supply:</u> System sexpire in 5 years.	
(In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration	for permit renewal.
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 Pe	ermit and Construction Authorization.
+ Lines OK Joliliy BM PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule .1961.	the top of top
II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes D No D If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation:	
V. Other:	
□ D-Box □ Pump □ Alarm □ H20Line	PWR Line
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: □ Conventional IP Other FZF/6w Septic Tank: 1000 gallons Subsurface No. of exact length width of Drainage Field ditches 1 of each ditch 365 feet French Drain Required: Linear feet Linear feet Linear feet	
Authorized State Agent Sugar Martin Date 10/10	1/2014