Harnett County Department of Public Health 23930	
Permit # 28105 Operation Permit	
New Installation Septic Tank Mitrification Line Repair Expans	sion
PROPERTY LOCATION: Dee's Red.	
Name: (owner)	
System Installer: The residuation The residuation Registration Company Compan	
Spe of Water Supply: □ Community □ Public □ Well Distance from well feet	
system Type: Types V and VI Systems expire in 5 years.	
In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal.	
his 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.	
House Restrictly Derbyhn.	
ERMIT CONDITIONS: Performance: System shall perform in accordance with Rule .1961.	
Monitoring: As required by Rule .1961.	
II. Maintenance: As required by Rule .1961. Other:	
If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
/. Operation:	
Other:	
D-Box	Line
ollowing are the specifications for the sewage disposal system on the above captioned property. ype of system: Conventional Other Colo gallons Pump Tank: gallo	ons
ubsurface No. of exact length width of depth of	
rainage Field ditches 3 of each ditch 100 feet ditches 3 feet ditches 18 inches rench Drain Required:	
11	
uthorized State Agent Sugar Musiam LEH Date 1/6/20/6	