HTE# 15-5-354801

## Harnett County Department of Public Health

23785

PERMIT # <u>28460</u>	Operation Permit	20/03
	☑ New Installation ☑ Septic Tank ☑ Nitrification Line	☐ Repair ☐ Expansion
	PROPERTY LOCATION: SC 1789 W Smile and	CD
Name: (owner) DANTER Ble TANNER.		LOT #/
System Installer: Tokron Tothon with plumbing: Garage Mumber of Bedroom	Registration # <u> 多ワ</u>	
Type of Water Supply:   Community   Public   Well		
System Type: 2500 REDUCTION 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 per	mit 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 Permit and	Construction Authorization.
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	D ( 76 67' 2 30' =	1
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	W Red job	
	Repare /	
	5R1789 W STRICKHANDS RD	
PERMIT CONDITIONS:	1011	
<ul> <li>I. Performance: System shall perform in accordance with Rule</li> <li>II. Monitoring: As required by Rule .1961.</li> </ul>	a .1961.	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes		
If yes, see attached sheet for additional operation:	ation conditions, maintenance and reporting.	
V. Other:		
□ D-Box □ Pump	□Alarm □H20Line □ _	PWR Line
Following are the specifications for the sewage disposal system on the Type of system:   Conventional Other 15% 763		ianlo adlana
Subsurface No. of exact leng	gth width of depth	•
		s 28518 inches
French Drain Required: Linear feet		
Authorized State Agent	Manhor J- 26-75	