HTE# 15-5-3549)

Harnett County Department of Public Health

23646

PERMIT # 28200	Operation Permit
	New Installation Septic Tank Nitrification Line Repair Expansion
	PROPERTY LOCATION: McDoughen Ro
Name: (owner) Moss HomeBulloEn	
System Installer: ALEX MOSS	Registration #
Basement with plumbing: Garage Number of Bedroom	s <u>3</u>
Type of Water Supply: Community Public Well	
System Type:	Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewal.
(III accordance with rable v a)	owner must contact nearth bepartment o 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 Permit and Construction Authorization.	
MCD & OGALD RO	REAL ASEA HOUSE AGE A AGE A AGE A A A A A A A A A A A
 I. Performance: System shall perform in accordance with Rule II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:	No De la companya de
If yes, see attached sheet for additional oper IV. 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	e above captioned property. Septic Tank: 1000 gallons Pump Tank: gallons
French Drain Required: Linear feet	
Authorized State Agent	PENS Date 5/22/15