| HTE# 15-5-3 | Harnett County Department of Public Health | 24271 |
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| PERMIT # 287 | Operation Permit | 272/1 |
| | New Installation & Septic Tank & Nitrification Line PROPERTY LOCATION: Sangues Section. | Repair Expansion |
| Name: (owner) | H-H ONSTE HOMES SUBDIVISION WALNUT GROVE | LOT # \ \ \ |
| System Installer: _ | GTIS STRICKLAND Registration # | |
| Basement with plumbin | oing: Garage Number of Bedrooms One of | |
| System Type: | Types V and VI Systems expire in 5 years. | |
| (In accordance with Ta | Table V a) Owner must contact Health Department 6 months prior to expiration for permit | renewal. |
| This system has been install | alled in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Cor | nstruction Authorization. |
| | PEPAIR 1 BODA | |
| | HO756 | |
| | | |
| | 1 | |
| PERMIT CONDITIONS: I. Performance: II. Monitoring: III. Maintenance: IV. Operation: | System shall perform in accordance with Rule .1961. As required by Rule .1961. Other: Subsurface system operator required? Yes No No If yes, see attached sheet for additional operation conditions, maintenance and reporting. | |
| V. Other: | SEE SUBDIVISION MAR FOR SURDLY LIVE PATIN AND EASONERT | LOCATI UN |
| | | PWR Line |
| Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Convent | | |
| Linear received | | |
| Authorized State Ag | Agent Date 9 6 16 | |