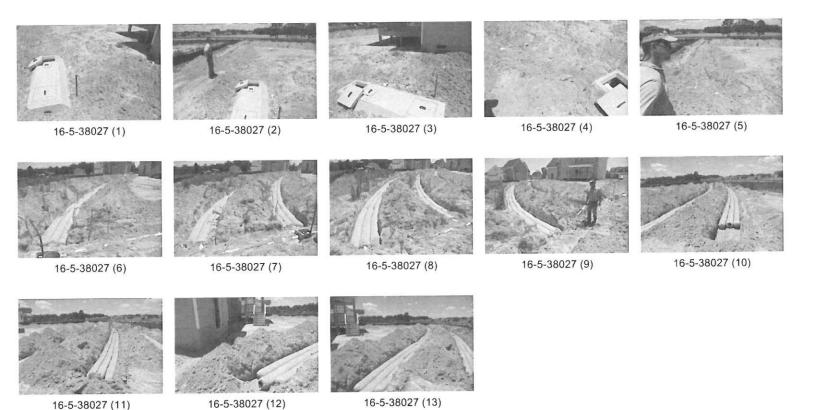
HTE#16-5-38027	Harnett County Department of Public Health 24054	
PERMIT # 28700	Operation Permit	
	New Installation Septic Tank Mitrification Line Repair Ex	cpansion .
7	PROPERTY LOCATION: ST 1448 ATKENS (C)	
Name: (owner) Koyal Da	HKS Budding Georp SUBDIVISION ATKINS VILLINGE LOT # 5	5
	Registration #	
Type of Water Supply: Commu	Garage ☑ Number of Bedrooms <u> </u>	
System Type:		
(In accordance with Table V a) Owner must contag 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 Permit and Construction Authorization.		
	13 D is	
	32' SS) G D	
PERMIT CONDITIONS:	ATKENS VELLAGO CODET	
I. Performance: System sha	ll perform in accordance with Rule .1961.	
	by Rule .1961. Other:	
Subsurface	system operator required? Yes 🗆 No 🗆	
IV. Operation:	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 Other 25% TOREDUCTOR Septic Tank: 1000 gallons Pump Tank: gallons gallons Pump Tank: gallons gallons Pump Tank: gallons gallo		gallone
Subsurface No. of	exact length width of depth of	- ganons
Drainage Field ditches	3 of each ditch 100 feet ditches 3 feet ditches 22.1 in	nches
French Drain Required:	Linear feet	71
Authorized State Agent	anes & MANhant WASHS Date 6-8-16	

Harnett County Department of Public Health

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16-5-38027 (11)