HTE# 13-5-31540

Harnett County Department of Public Health

PERMIT # <u>2748</u> .	5	Operation Permit	22935
		✓ New Installation ☐ Septic Tank ✓ Nitrification Lin	e 🗆 Repair 🗆 Expansion
	: MC./ 1	PROPERTY LOCATION: 2412. By rds M:11 Rd.	
Name: (owner)	orraine Meleil	SUBDIVISION	LOT # <u></u>
System Installer:		Registration #	
Basement with plumbing Type of Water Supply:		Distance from well feet	
System Type:	\mathbb{Z}_{6}	Types V and VI Systems expire in 5 years.	
(In accordance with Tab	le V a)	Owner must contact Health Department 6 months prior to expiration for	permit renewal.
This system has been installed	in compliance with applicable North Carolina General Stat	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit	and Construction Authorization
This system has been histained	in composite and appreciate notes caronia delicial state	totes, notes for sewage recurrent and orsposar, and an conditions of the improvement remit.	and construction Authorization.
		Fence Force Force Force D L T V T T T T T T T T T T T	
		Byrds M:11 Rd.	
PERMIT CONDITIONS:			
	System shall perform in accordance with Rule . As required by Rule .1961.	1961.	
III. Maintenance:	As required by Rule .1961. Other:		
	Subsurface system operator required? Yes 🗆 N		
IV. Operation:	If yes, see attached sheet for additional operati	ion conditions, maintenance and reporting.	
ii. Operation.			
V. Other:			
	D-Box 🗆 Pump	□ Alarm □ H20Line □	PWR Lin
	cations for the sewage disposal system on the s	above captioned property.	
Type of system: 🗹 Co Subsurface	onventional	•	
	ditches of each dit	ch 200 feet ditches 3 feet di	epth of itches <u>30-36</u> inches
French Drain Required: _	Linear feet		menes
		= 1 1	
Authorized State Age	ny Juya Missing R	EH) Date Date	2017