HTE# Harnett Co	ounty Department of Pub	lic Health	25862
PERMIT # EH 2102-0008	Operation Permit		23002
	□ New Installation □ Septic Tank	Nitrification Line	Repair Expansion
	PROPERTY LOCATION: STILLO	Overhills RD	
Name: (owner) Gresory Normand	SUBDIVISION Whisper	Leek	LOT # _ <i>30</i>
System Installer: Ted Brown + ABS	Registration #		
Basement with plumbing: ☐ Garage ☐ Number of Bedrooms Type of Water Supply: ☐ Community ☐ Public ☐ Well	Distance from well feet		
System Type: Low Profile Olympian	Types V and VI Systems e	expire in 5 years.	
(In accordance with Table V a)	Owner must contact Health Department 6 mor		mit renewal.
This system has been installed in compliance with applicable North Carolina General St	ratutes Rules for Sewage Treatment and Disposal and all con-	ditions of the Improvement Permit and	Construction Authorization
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	Whisper Creek CT		
PERMIT CONDITIONS:	William Creek Ci		
I. Performance: System shall perform in accordance with Rule	.1961.		
II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:			
Subsurface system operator required? Yes	No 🗆		
If yes, see attached sheet for additional oper			
IV. Operation:			
V. Other:			
□ D-Box □ Pump	□ Alarm □	H20Line □	PWR Line
Following are the specifications for the sewage disposal system on the		TIEVEIIIO 🗆	I THE LINE
Type of system: Conventional Other Low Pr	of the Charter Septic Tank:	Ex gallons Pump	Tank: 1000 gallons
Subsurface No. of I exact len		dept	h of
Drainage Field ditches of each	ditch feet ditches	feet ditch	nes 12 inches
	1-744		
Authorized State Agent 2 Many	hant in zons	Date 3-11-	21