HTE#_ EH 2102-0021

Harnett County Department of Public Health

No. 26352

PERMIT # ~~

Operation Permit

TEMM II	D. Northerine D. Code Tol. De Nick of the De Northerine
	□ New Installation □ Septic Tank ☑ Nitrification Line □ Repair □ Expansion
No.	PROPERTY LOCATION: 345 Vannis chiefe Dr.
Name: (owner) CAN' BNAN ANDRESON	
System Installer: CLIUT NOAMS	Registration #
Basement with plumbing: Garage Wounder of Bedrooms	
Type of Water Supply: Community Public Well System Type: 2570 Community Public Well	
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for permit renewal.
7	The mast contact near of partition of months provide expression for permit renewal.
This system has been installed in compliance with applicable North Carolina General St.	atutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
	INSTALL: 03/30/2021
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PERMIT CONDITIONS:	1961
I. Performance: System shall perform in accordance with Rule	.1961.
II. Monitoring: A required by Rule .1961.	.1961.
III. Maintenance: As required by Rule 1961. Other. Subsurface system operator required? Yes If yes, see attached sheet for additional oper.	W DVC(N) S
If yes, see attached sheet for additional oper	NO L. *
IV. Operation:	audi Conditions, maintenance and reporting.
V. Other:	
□ D-Box □ Pum	p 🗆 Alarm 🗆 H20Line 🗆 PWR Line
Following are the specifications for the sewage disposal system on the	above captioned property.
Type of system: Conventional Cother Conventional	
Subsurface No. of exact len	
	fitch 70 feet ditches 3 feet ditches 22 inches
French Drain Required: Linear feet	
Authorized State Agent	Date 03/31/2021
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