HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

Nº07175

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

N -1 C 161		
Name: (owner) David Gullickson		
Property Location: SR# 1202 7 27		A TOTAL TOTAL CONTRACTOR OF THE PARTY OF THE
Subdivision	Lot #	
TAX ID#	Quadrant #	
Contractor: Wayk Sharpe	Registration # 24	
Basement with Plumbing: Garage:		
Water Supply: Well Public Community	y	
Distance From Well: 50 f ft.		
Following are the specifications for the sewage dispos	al system on above ca	ptioned property.
Type of system: Conventional Other		
Size of tank: Septic Tank: (000 gallons Pump		
Subsurface No. of exact length of each ditch 75	width of ft. ditches 3 ft.	depth of 18-29 in.
French Drain: Linear feet	2-17	201
Da	ite: 2-17-9	7
PERMIT NO. <u>40/0</u> Inc	spected by:: Thomas	s J. Bogu
		Health Specialist
	Dilvii ominomuri	router operation
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