HARNETT COUNTY HEALTH DEPARTMENT ENVIR 1ENTAL HEALTH SECTION

Nº 5895

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Property Location: SR# Subdivision Mire Brand	
Contractor: Ted Brown	Registration #
Basement with Plumbing: Garage: Garage:	
Water Supply: Well Public C	ommunity
Distance From Well: ft.	
Type of system: Conventional Other _ Size of tank: Septic Tank: _/000 gallons	ge disposal system on above captioned property.
Size of tank: Septic Tank:/000 gallons	Pump Tank: gallons
Subsurface No. of 2 exact length of each ditches 2	
French Drain: Linear feet MIT NO. 572-9	Date: 8/21/92 Inspected by:: Charle Hoolth Specialist

