## HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

Nº08062

## CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

|   |                              | 1.08   |
|---|------------------------------|--|
| Name: (owner) Paul L. William                       | ns Jr. & New Installation    | Septic Tank  |
| Property Location: SR# 1427                         | □ Repairs                    | Nitrification Line   |
| Subdivision   | Lot #                        | A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |
| TAX ID#   | Quadrant #                   |  |
| Contractor:   | Registration #               |  |
| Basement with Plumbing:   Garage:                   |                              |  |
| Water Supply:  Well Public Con                      | nmunity                      |  |
| Distance From Well:ft.                              |                              |  |
| Following are the specifications for the sewage     | disposal system on above o   | captioned property.  |
|   |                              |  |
| Type of system: Conventional Other                  |                              | - 4 18   |
| Size of tank: Septic Tank: \( \sum_{OOD} \) gallons |                              |  |
| Subsurface No. of exact length of each ditch        | width of 3 ft. ditches 3 ft. | depth of 18-24 in.   |
| French Drain: Linear feet                           | 10/21                        | 1011   |
| 7720  | Date: 10/31                  | 199  |
| PERMIT NO   | Inspected by:: Mu            | is Casken KB   |
|   | Environmental                | Health Specialist  |
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