HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

No 8455

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Tim Leonard ☐ New Installation ☐ Septic Tank

Property Location: SR# 2035 Stockyard Rd ☑ Repairs ☐ Nitrification Line

Subdivision _____ Lot # _____

TAX ID# _____ Quadrant # _____

Contractor: Otis Strickland Registration # _____

Basement with Plumbing: ☐ Garage: ☐

Water Supply: ☐ Well ☐ Public ☐ Community

Distance From Well: _____ ft.

Following are the specifications for the sewage disposal system on above captioned property.

Type of system: ☐ Conventional ☐ Other _____

Size of tank: Septic Tank: _____ gallons Pump Tank: _____ gallons

Subsurface Drainage Field: No. of ditches 2 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain: _____ Linear feet

Date: 10/10/95

PERMIT NO. 09306

Inspected by:: Chris Asker, R.S.

Environmental Health Specialist