HTE# <u>08-500</u>-20199

HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH 307 CORNELIUS HARNETT BOULEVARD LILLINGTON, NC 27546

EXISTING SEPTIC SYSTEM INSPECTION

NAME MAKION HORAL	PHONE #	485.425
ADDRESS Jaol Snagade School Rd		
NAME OF MOBILE HOME PARK OR S/D Sesce		421
NAME OF OWNER (IF DIFFERENT) _ M. ke E	ker "	
ADDRESS OF OWNER (IF DIFFERENT) 3404 (Daywood Dr.	Fa, no
PROPERTY LOCATION: STATE ROAD NAME AND #	SRIII	3
PURPOSE OF INSPECTION: MH Replace	4	
The aforementioned site has been evaluated by the H Environmental Health Section. At the time of inspection system serving this site. If this system should malfund any necessary repairs	on, there appeare tion, the owner is	

THIS INSPECTION IS VOID IF:

- (1) the intended use of the septic system should change, and/or
- (2) the system should fail or malfunction, and/or
- (3) the owner or tenant of the property changes, and/or
- (4) after six months

BUILDING MUST BE 5' FROM ANY PART OF SEPTIC SYSTEM DO NOT DRIVE OR PARK ON SEPTIC SYSTEM

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AUTHORIZATION OF EXIST	TING SYSTEM
12	000 X
Signature of Environmental Health Specialist	Date
Signature of Environmental Health Specialist	Date