HTE# <u>08-5-20656</u>

## Harnett County Department of Public Health

20346

PERMIT # 24943

Operation Permit

	New Installation 🗵 Septic Tank 🗆 Repair 🗷 Nitrification Line [	☐ Expansion
	PROPERTY LOCATION: Hwy210	
Name: (owner) KEMMETH MOSS	SUBDIVISIONLOT #	‡
System Installer: LONNIE JOHNSON	Registration #	
Basement with plumbing: Garage Number of Bedrooms		
Type of Water Supply:  Community Public Well	Distance from well 100 feet	
System Type: TYP (In accordance with Table V a)	Types V and VI Systems expire in 5 years.	
(in accordance with fable 1 a)	Owner must contact Health Department 6 months prior to expiration for permit renewal.	
This system has been installed in compliance with applicable North Carolina General Stat	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Author	ization.
PERMIT CONDITIONS:	1M1719 10 10 10 10 10 10 10 10 10 10	
<ol> <li>Performance: System shall perform in accordance with Rule.</li> <li>Monitoring: As required by Rule .1961.</li> </ol>	1961.	
II. Monitoring: As required by Rule .1961.  III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes \(\sigma\) N	0 🗵	
If yes, see attached sheet for additional operation:		
V. Other:		
Following are the specifications for the sewage disposal system on the a Type of system:  Conventional  Other  EZ  FLOO  Subsurface  No. of  Prainage Field  ditches  Linear feet	Septic Tank: 1000 gallons Pump Tank:	· ·
Authorized State Agent	Date 11/688	