HTE# <u>08 500- 210</u> 3 รคล Harnett County Department of Public Health 2048	32
PERMIT # 25093 Operation Permit	
New Installation ★ Septic Tank □ Repair ★ Nitrification Line □ PROPERTY LOCATION: (>× M·) R →	4
Recompet with plumbing C Garage Mumber of Deducers 7	. 47 AL
Type of Water Supply: Community Public Well Distance from well 75 feet	
System Type: Types V and VI Systems expire in 5 years. (In accordance with Table V 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 Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authority	zation.
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PERMIT CONDITIONS:	
l. Performance: System shall perform in accordance with Rule .1961. II. Monitoring: As required by Rule .1961.	3
III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes 🔲 No 🗀 If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:	
V. Other:	
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other Other Conventional Con	gallons
Subsurface No. of exact length width of depth of	·
Drainage Field ditches A of each ditch feet ditches feet ditches feet ditches feet ditches feet ditches feet ditches feet	inches
C II Acc	
Authorized State Agent 4 V NT 163 Date 11-13-28	