HTE# <u>10-5-2</u>	5433 Harnett County Department of Public Health		
рекміт # <u>263</u>	<u>53</u> <u>Operation Permit</u> 21791		
	\bowtie New Installation \bowtie Septic Tank \bowtie Nitrification Line \square Repair \square Expan	nsion	
	PROPERTY LOCATION: Dove Ko		
Name: (owner) Humanissis Compare SUBDIVISION WADDELL ESK LOT # System Installer: Bizz Hancy Registration #			
Basement with plumb			
Type of Water Supply			
System Type: (In accordance with T			
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 Authorization.			
This system has been instance in compnance wer applicable notification authorization.			
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	1 - 1/1/		
	I REPARE,		
	DRIVE D8: 190-		
	303		
	83		
	V I		
	Dove RP		
PERMIT CONDITIONS:			
I. Performance: II. Monitoring:	System shall perform in accordance with Rule .1961. As required by Rule .1961.		
III. Maintenance:	As required by Rule .1961. Other:		
	Subsurface system operator required? Yes \Box No \Box If yes, see attached sheet for additional operation conditions, maintenance and reporting.		
IV. Operation:			
V. Other:			
	 D-BoxPumpAlarmH20LinePWR	R Line	
	Plack romp romp Adding romp r	LINE	
Type of system: 🗙	Conventional 🗆 Other Septic Tank: 1000 gallons Pump Tank: gall	ions	
Subsurface Drainage Field	No. of $exact length$ $uiches \underline{4}$ $uiches \underline{3}$ feet $uiches \underline{3}$ feet $uiches \underline{3}$ feet $uiches \underline{3}$ inches		
French Drain Required:			
Authorized State Ag	gent Date Date Date		
	\mathcal{I}		