HTE# 13-5-3156]

Harnett County Department of Public Health

PERMIT # 27536		<u>Operation</u>	Permit		22900
FENTILI #	•			Nitrification Line 🗆	Repair Expansion
			ATION: CHARLAC		,
Name: (owner) LATIKKA	DAMSON		MORONE		LOT # <u>1</u>
System Installer: Jones &	SERTIC	Registration			
Basement with plumbing: Garage	☐ Number of Bedrooms	3			
./[Public Well	Distance from well 15		va in Europe	
System Type: (In accordance with Table V a)	나> 		es V and VI Systems expi Ith 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 Authorization.					
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PERMIT CONDITIONS:		110			
	rm in accordance with Rule	.1961.			
II. Monitoring: As required by Ru					
III. Maintenance: As required by Ru	ıle .1961. Other: operator required? Yes 🗆	No X			
If yes, see attache	ed sheet for additional opera	tion conditions, maintenan	ce and reporting.		
W A	•				
V. Other:	n		Al	U201: □	PWR Line
	Pump			H20Line 🗆 _	PWR Line
Following are the specifications for the se	wage disposal system on the	above captioned preperty	Cantic Tanks \	②○○○ gallons Pump Ta	ank. gallong
Type of system: Conventional Subsurface No. of	Other <u>CHAME</u> exact leng	rth	width of	denth	nf
Drainage Field ditches	of each d	itch <u>180</u> feet		3 feet ditches	24-30 inches
French Drain Required:	Linear feet				
				ماعا	
Authorized State Agent		REHS		Date 9613	