HTE #: 16-5-38092

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

EXISTING SEPTIC SYSTEM INSPECTION

Name: Jose	eph B. Davis	Phone #: 910-514-9405
Address: 4	3 Legacy Ln. Lillington,	NC 27546
Name of M	obile Home Park or S/D:	Twin Lakes lot 6
Name of Ov	wner (if different):	_
Address of	Owner (if different):	
Property Lo	ocation (State Road name	and #): mckay drive
Purpose of	Inspection: replace home	<u>e</u>
Environme	ental Health Section. At ving this site. If the syste	evaluated by the Harnett County Health Department the time of inspection, there appeared to be a septic tem should malfunction, the owner is responsible for any
 the i the s the c 	PECTION IS VOID IF: ntended use of the septic system should fail or malf owner or tenant of the pro- six months	system should change, and/or function, and/or

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

AUTHORIZATION OF EXISTING SYSTEM

Signature of Environmental Health Specialist

Date