HTE# 12-5-29245

Harnett County Department of Public Health

PERMIT # 27118	Operation Permit	22371
	New Installation Septic Tank Mitrification Line	☐ Repair ☐ Expansion
	PROPERTY LOCATION: Thomas Form Rd	
Name: (owner) Clyde L. Patterson	SUBDIVISION CBC	LOT # _/
System Installer: Lanie John son	Registration #	
Basement with plumbing: Garage Number of Bedrooms		
Type of Water Supply: Community Public Well	Distance from well 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 per	nit renewal.
This system has been installed in compliance with applicable North Carolina General State	utes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and	Construction Authorization.
	wood Line	
	Repair Area	
	· Pine	
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	MH 40'	
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PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance with Rule .	1961.	
II. Monitoring: As required by Rule .1961. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes \(\sigma\) N		
If yes, see attached sheet for additional operati		
IV. Operation:		****
V. Other:		
□ D-Box □ Pump	□Alarm □H20Line □ _	PWR Line
Following are the specifications for the sewage disposal system on the	above captioned property.	
Type of system: Conventional Other EZFlow		
Subsurface No. of exact length	h width of depth ch <u>240</u> feet ditches <u>3</u> feet ditche	of 2 c/ · ·
Drainage Field ditches/ of each ditches/ Linear feet	ch $\frac{240}{}$ feet ditches $\frac{3}{}$ feet ditches	s 24 inches
Lilled leet	, ,	
Authorized State Agent Surger Mysel	2EHS Date 7/19/29	<i>'2</i>