## Harnett County Department of Public Health

		, ,			
PERMIT # 395	2101-0073	/ Operation	Permit	/	
		/		Nitrification Line	Repair   Expansion
			TION: OX MIN HOL		
Name: (owner)	RT MANAging Prop		CAROLENO		LOT # <i>Z</i> }
		JODDITISION .	Chicaco	O DIVIOU	
System Installer: Basement with plumbing		ioms 3			
Type of Water Supply:   Community Public   Well Distance from well feet					
System Type: 252 FROUCTION STORE TIME TO Charle 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.					
QUEK-4					
This system has been installed in compliance with applicable North Carolina Serveral Statutes, Rules for Sewage Treatment and Disposal, and all Contactions of the Improvement Permit and Construction Authorization.					
	Andre The Andrews	21 D 45.45'	Man 23.		
	-	SN 1712	Hubson 1215		
PERMIT CONDITIONS:					
I. Performance:	System shall perform in accordance with	Rule .1961.			
II. Monitoring: III. Maintenance:	As required by Rule .1961. As required by Rule .1961. Other:				
III. Haintenance.	Subsurface system operator required? Yes				
	If yes, see attached sheet for additional		e and reporting.		
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 15901600 Conventional Septic Tank: 1000 gallons Pump Tank: gallons					
Type of system:		DUCTUON			
Subsurface	No. of exact ditches 3 of ex	t length ach ditch <u>102</u> feet	width of ditches	depth of ditches	/3° inches
Drainage Field French Drain Required:		ich ditch _/ = 1eet	aircues	feet ditches _	incles
Authorized State A-	ront J	Manhan 8-11	TOSMO I	Date 6-15-2	
Authorized State Ag	CIN	10 January	L	vale 6 1	