Harnett County Department of Public Health

Name: (owner)	PERMIT # SF D 2401-003 3	Operation Permit	
PROPERTY LOCATION: 69 Sheeley Need LN System Installer: CNM Plumb: 3 System Dear System with plumbing: Garage Symmetry of Bedroom: 4 System Dear System with plumbing: Garage Symmetry Orbitics Present Variation Symmetry Community System Dear System (In accordance with July Business with pupilish Worth Crolina Green'd Standard LN Types V yang Vil Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewal. Needs pump A Alacan For Final Performance: In Monitoring: In Maintenance: As required by Bull 1961. Other: Subsurface system operator required? Test In to In International Conditions of the System Sys	$oldsymbol{ol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol}oldsymbol{ol}}}}}}}}}}}}}$		
Name: (owner) VRB HONES SUBDIVISION Hones (which is a plumbing and pl	244 1	PROPERTY LOCATION: 69 Shelby Meaded LN	
PERMIT CONDITIONS: 1. Performance: 1. Needs pump + Alarm For Final 1. System shall perform in accordance with Rule 1.961. 2. Stem System shall perform in accordance with Rule 1.961. 3. Stem System shall perform in accordance with Rule 1.961. 4. The Performance: 1. No operation: 1. V. Operation: 1. D. Box Pump Alarm H20Une PWR Line Following are the specifications for the sewage disposal system on the above continued property: 1. C.		SUBDIVISION Honey cutt Hills LOT # 4	
Specific Community Specific Well Distance from well Types V and W Systems expire in 5 years.			
System type: 25% Reduction Type: Typ		4	
The system half perform in accordance with Rule 1961. Reformance: Permit Conditions: System shall perform in accordance with Rule 1961. Performance:	System Type: 2.5% Community Public Well Distance from well feet		
PERMIT CONDITIONS: L. Performance: System shall perform in accordance with Rule .1961. Monitoring: As required by Rule .1961. Maintenance: As required by Rule .1961. Monitoring: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. Maintenance: As required by Rule .1961. As required by Rule .1961. As required by Rule .1961. Maintenance: As required by Rule .1961. As required by Rule .1	(In accordance with Table V a) Ow	fer must contact Health Department 6 months prior to expiration for permit renewal.	
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule .1961. Monitoring: As required by Rule .1961. Maintenance: System shall perform in accordance with Rule .1961. As required by Rule .1961. III. Monitoring: As required by Rule .1961. If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Other: Debox Pump Alarm H20Line PWR Line Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other Type that Conventional Other Type (system: Conventional Other Type (state) and the sewage disposal system on the above captioned property. Type of system: Conventional Other Type that Conventional Other Type (state) and the sewage disposal system on the above captioned property. Type of system: Conventional Other Type that Conventional Other Type (state) and the sewage disposal system on the above captioned property. Type of system: Conventional Other Type that Conventional Other Type (state) and the sewage disposal system on the above captioned property. Type of system: Conventional Other Type that Conventional Other Type (state) and the sewage disposal system on the above captioned property. Type of system: Conventional Other Type that Conventional Other Ty		ROAD	
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Subsurface system operator required? Yes \(\text{No} \) \(\text{If yes, see attached sheet for additional operation conditions, maintenance and reporting.} \) IV. Operation: V. Other: \[\text{D-Box} \text{Pump} \text{Pump} \text{Alarm} \text{H2OLine} \text{PWR Line} \] Following are the specifications for the sewage disposal system on the above captioned property. Type of system: \(\text{Conventional} \text{Conventional} \text{Other} \text{Type} \text{TH} \(\text{L} \) \(\text{Conventional} \text{V200} \text{gallons Pump Tank:} \text{L200} \text{gallons} \text{Subsurface} \text{No. of } \text{exact length} \text{width of } \text{depth of } \text{depth of } \text{ditches} \text{Type} \text{ditches} \text{ditches} \text{ditches} \text{ditches} \text{ditches} \text{ditches} \text{ditches} \text{ditches} \q	. ,	The stand I'M	
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	French Drain Required: Linear feet		
Authorized State Agent Date 5 24 24			