## Harnett County Department of Public Health

PERMIT # SFD 2403-0014

Operation Permit

Name: (owner) Coroll Construction Homes SUBDIVISION Shiloh Lot #  System Installer: Correll Construction  Basement with plumbing: Garage Number of Bedrooms 3 (6 people)  Type of Water Supply: Community Public Well Distance from well feet  System Type: Types V and VI Systems expire in 5 years.	Expansion 84
(In accordance with Table V a)  Owner must contact Health 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 Authoriza 28'  28'  28'  38'	ition.
PERMIT CONDITIONS:   System shall perform in accordance with Rule .1961.   Monitoring:	
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 25 3 Septic Tank: 1000 gallons Pump Tank:   Subsurface No. of exact length width of Drainage Field ditches 1 feet ditches 3 feet ditches 24  French Drain Required: Linear feet	gallons inches
Authorized State Agent	