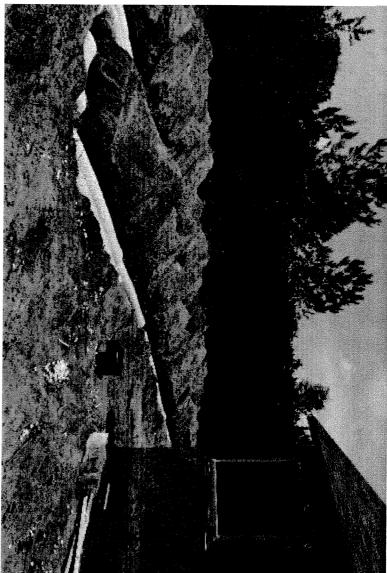
HTE# 08.20	0-17803	Harnett Co	unty Departm	ent of Public	Health	201	35
Name: (owner)	OCCOCONO  COCOCONO  COCOCOCO  Garage   V:   Community   F  Table V a)	umber of Bedrooms _ ublic	SUBDIVISION Registration  Distance from well Suppose Types Owner must contact Healt	Septic Tank	in 5 years. ior to expiration for	LOT permit renewal.	# <u>52</u>
This system has been insta	alled in compliance with applicable N	orth Carolina General Statu	ites, Rules for Sewage Treatment a	nd Disposal, and all conditions o		t and Construction Auth	orization.
PERMIT CONDITIONS:		[0]	15 18° 7		20	pl Reson	
I. Performance:  II. Monitoring:  III. Maintenance:  IV. Operation:	System shall perform in ac As required by Rule .1961. As required by Rule .1961. Subsurface system operator If yes, see attached sheet f	Other: No	8	and reporting.			_
V. Other:							- -
Following are the spec Type of system: Subsurface Drainage Field French Drain Required:	No. of ditches	exact length of each ditch	230	Septic Tank:		np Tank: \sum \subseteq \infty pth of tches \sum \frac{1}{Y}	gallons
Authorized State Ag	gent	LAR,		Date	28-07	-08	







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