Harnett County Department of Public Health

Operation Permit PERMIT # Bres 2104 -0025 New Installation Septic Tank Mitrification Line Repair Expansion PROPERTY LOCATION: 74 Madison (SR 1157) LOT # SUBDIVISION Name: (owner) System Installer: Garage Number of Bedrooms Basement with plumbing: Type of Water Supply: ☐ Community ☑ Public ☐ Well Distance from well Types V and VI Systems expire in 5 years. System Type: (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 Authorization. TO BOWN Rd -PERMIT CONDITIONS: System shall perform in accordance with Rule .1961. Performance: II. As required by Rule .1961. Monitoring: As required by Rule .1961. Other: III. Maintenance: Subsurface system operator required? Yes
No Se If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: □______Pump □______Alarm □ **PWR Line H20Line** D-Box Following are the specifications for the sewage disposal system on the above captioned property. gallons Pump Tank: ☐ Other Septic Tank: Type of system: Conventional width of Subsurface No. of of each ditch ditches Drainage Field Linear feet French Drain Required: Date 3-15-22 Authorized State Agent