

Harnett County Department of Public Health

PERMIT # BRES2109-0048

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: 341353 138 SYDORS LN

Name: (owner) Krista Martin SUBDIVISION _____ LOT # _____

System Installer: Urry Range

Basement with plumbing: Garage Number of Bedrooms 3

Type of Water Supply: Community Public Well Distance from well _____ feet

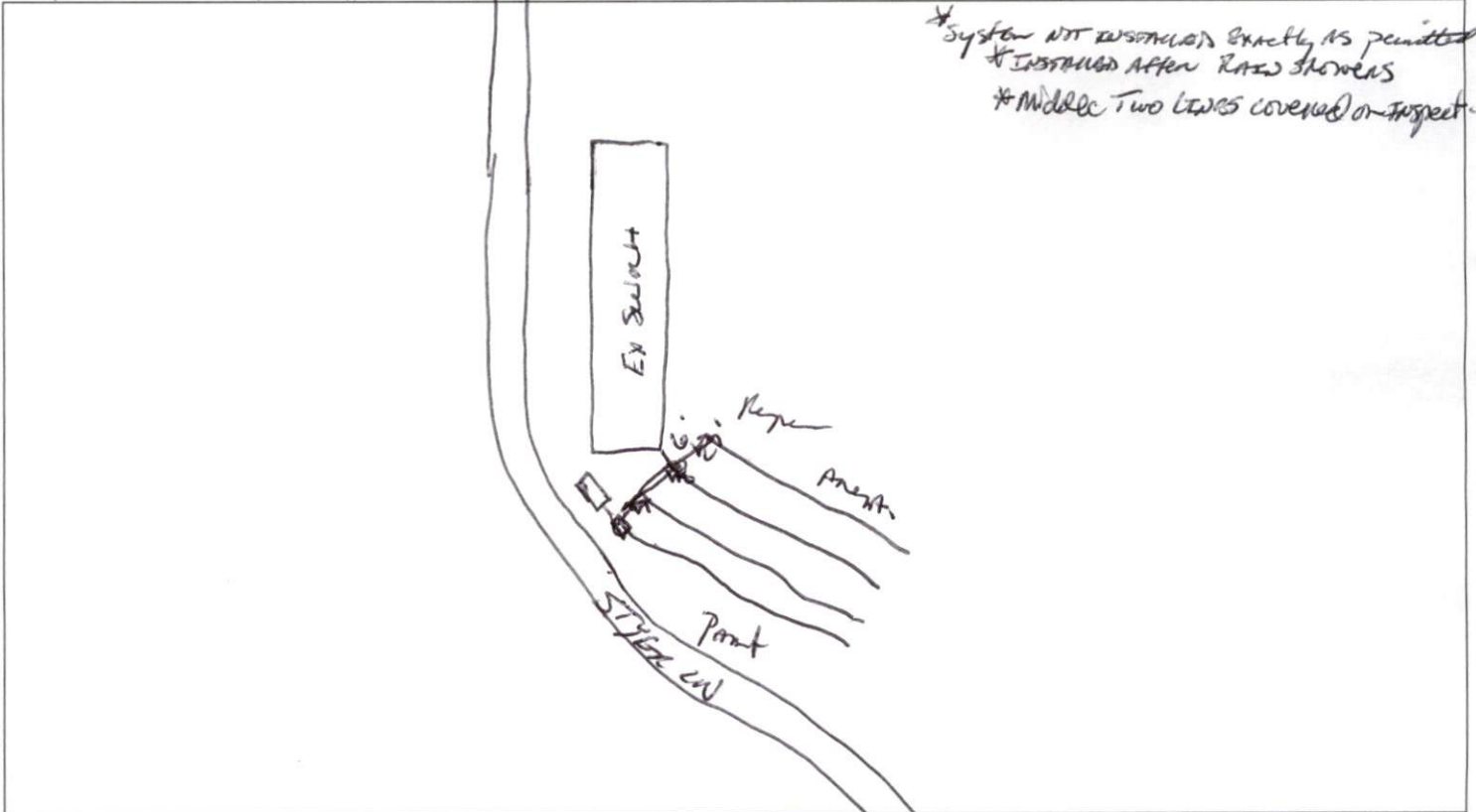
System Type: 25% Reducation System Type at 6 inch Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

Owner must contact Health Department 6 months prior to expiration for permit renewal.

25% 4

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.



* System NOT INSTALLED EXACTLY AS PERMITTED
 * INSTALLED AFTER RATED SHOWERS
 * Middle Two LINES COVERED OR SUSPECT

PERMIT CONDITIONS:

- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- III. Maintenance: As required by Rule .1961. Other: _____
 Subsurface system operator required? Yes No
 If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

D-Box Pump Alarm H2O Line PWR Line

Following are the specifications for the sewage disposal system on the above captioned property. QUICK 4
 Type of system: Conventional Other 25% REDUCATION SYSTEM Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface No. of exact length width of depth of
 Drainage Field ditches 1 of each ditch 180 feet ditches 3 feet ditches 24 inches
 French Drain Required: _____ Linear feet

Authorized State Agent: James E. Martin Date 12-20-21