Harnett County Department of Public Health

PERMIT # BARS 2202 - 0052 Operation Permit
☐ New Installation ☐ Septic Tank ☐ Nitrification Line ☐ Repair ☐ Expansion
PROPERTY LOCATION: 42/769 OID STAGE TO
Name: (owner)
System Installer: HEadren Septict Backhone
Basement with plumbing: Garage Mumber of Bedrooms 3
Type of Water Supply: Community Public Well Distance from well feet System Type: 25% 7057000 Con System 12204y Types V and VI Systems expire in 5 years.
(In accordance with Table V a) Owner pous contact Health Department 6 months prior to expiration for permit renewal.
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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.
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PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule .1961. II. Monitoring: As required by Rule .1961. 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 □ H20Line □ PWR Li
Following are the specifications for the sewage disposal system on the above captioned property.
Type of system: Conventional Other 25% PS Septic Tank: 1000 gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of Drainage Field ditches 3 feet ditches 5 feet ditches 181 inches
French Drain Required: Linear feet
Authorized State Agent ones 2 Markan Date 4-26-22