Harnett County Department of Public Health

PERMIT # BAES 2204- 6038 Operation Permit	
New Installation Septic Tank Mitrification Line Repair	Expansion
PROPERTY LOCATION: 301516 Sheref Johnson	no
Name: (owner)	
System Installer: Come Coulhert	
Basement with plumbing: Garage Number of Bedrooms	
Type of Water Supply: Community Public Well Distance from well feet	
System Type: 75% (BNCEW) System Type 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.	
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	ition
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DEBUTE CAUDITIONS	0
PERMIT CONDITIONS:	TOT
 I. Performance: System shall perform in accordance with Rule .1961. II. Monitoring: As required by Rule .1961. 	Es
III. Maintenance: As required by Rule .1961. Other:	1571
Subsurface system operator required? Yes \(\square\) No \(\square\)	St. She
If yes, see attached sheet for additional operation conditions, maintenance and reporting.	Type
IV. Operation:	-072
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V. Other:	
D-BoxPumpAlarmH20Line	PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.	
Type of system: Conventional Other 25% (ed Septic Tank:	gallons
Subsurface No. of exact length width of depth of Drainage Field ditches of each ditch 90 feet ditches 3 feet ditches	
Drainage Field ditches of each ditch feet ditches feet ditches French Drain Required: Linear feet	_ inches
Linear rect	
Authorized State Agent Agent State Agent Agent State Agent Agent State Agent A	
Authorized State Agent Date 4-18-23	