Harnett County Department of Public Health

Name: (owner) BERNISE MARTINEZ SUBDIVISION TONY C BYRD LOT #	
System Installer:	
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 Author	ization.
REPARA DE	
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:	
	PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.	
Type of system: Conventional Conventional Other Pure 10 EZ Thore Subsurface No. of Example 10 EZ Thore Subsurface No. of	2 gallons
Drainage Field ditches 3 of each ditch 90 feet ditches 3 feet ditches 40	inches
French Drain Required: Linear feet	
Authorized State Agent Date 12/18/23	