## Harnett County Department of Public Health

PERMIT # Bres 2405-0016

Operation Permit

		Mew Installation Mess Sep	otic Tank 🔼 Nitrificatio	n Line 🔲 Repair 🗆 Exp	pansion
	0 1 11		11 Parton la (SI		
Name: (owner) Bratt	Compbell	SUBDIVISION		LOT #	
System Installer:	Garage Number of Bedrooms nmunity Public Well				
Basement with plumbing:	Garage Number of Bedrooms	4 (8 people)			
Type of Water Supply:   Con	nmunity Public   Well	Distance from well	feet		
system Type:	TypeTII-9	Types V and VI	Systems expire in 5 years.		
(In accordance with Table V a)	C	Owner must contact Health Departm	ent 6 months prior to expiration	in for permit renewal.	
This system has been installed in compli	iance with applicable North Carolina General Sta	tutes. Rules for Sewage Treatment and Disposal,	and all conditions of the Improvement	Permit and Construction Authorization.	
	70' 46' 17' (T)				
PERMIT CONDITIONS:	0-	- 1			
I. Performance: System s II. Monitoring: As requi III. Maintenance: As requi Subsurfa	shall perform in accordance with Rule ired by Rule .1961. ired by Rule .1961. Other: ired by Rule .1961. Other: ice system operator required? Yes N ee attached sheet for additional operator	.1961. No 🖎	rting.		
V. Other:					
□ D-Bo	ox 🗆Pump	□Alarm	□ H201	ino 🗆	DW/D I:
			□ H20L	ine 🗆	PWR Line
Type of system: Convention Subsurface No. of Drainage Field ditches French Drain Required:	exact length	th Sept	cic Tank: <u>1000</u> gallo width of ditches <u>3</u> feet	ons Pump Tank: depth of ditches inch	gallons hes
	-	1			
Authorized State Agent	No	L OF REHS	Date	-30-25	