Authorized State Agent_

Harnett County Department of Public Health

25279

Operation Permit_ New Installation Septic Tank Instrinction Line Repair Expansion PROPERTY LOCATION: 3281 Bailey's Crossroads 12. (50.1581) Properties System Installer: _ ___ Registration # _____ Basement with plumbing: Garage Number of Bedrooms Distance from well A feet Type of Water Supply:

Community Public ☐ Well 25% reduction 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 Authorization. 25% NEOULTION REPAIR AREA 3BR SFD 4 BAILETS CROSSROADS PERMIT CONDITIONS: Performance: System shall perform in accordance with Rule .1961. 11. 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: ٧. Other: D-Box Pump Alarm \square H20Line □ **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. Other EZ Flow III Type of system:

Conventional Septic Tank: / gallons Pump Tank: Subsurface No. of exact length width of depth of Drainage Field ditches of each ditch French Drain Required: Linear feet

Date