## Harnett County Department of Public Health

PERMIT # EH 2109-0011 **Operation Permit** New Installation Septic Tank Nitrification Line Repair Expansion PROPERTY LOCATION: 1088 old US 421 Southern Built LOT # ZR SUBDIVISION Name: (owner) System Installer: Garage Number of Bedrooms Basement with plumbing: Public Well Type of Water Supply: 

Community Distance from well Types V and VI Systems expire in 5 years. TYDE TIL B System Type: Owner must contact Health Department 6 months prior to expiration for permit renewal. (In accordance with Table V a) FUTUR repair Area 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. **PERMIT CONDITIONS:** System shall perform in accordance with Rule .1961. Performance: 1. As required by Rule .1961. II. Monitoring: As required by Rule .1961. Other: III. Maintenance: Subsurface system operator required? Yes \( \subseteq \text{No.} \text{\text{\text{No.}}} If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: Other: Alarm 🗆 \_\_\_\_\_ H20Line **PWR Line** Pump 🔼 D-Box Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: 

Conventional 

Other 

Type of system: 

Conventional 

Other 

Other 

Conventional 

Other 

Conventional 

Other 

Othe gallons Pump Tank: 1000 LQU Septic Tank: □ Other Type of system: 

Conventional width of exact length Subsurface No. of 75 of each ditch Drainage Field ditches Linear feet French Drain Required: Authorized State Agent