Harnett County Department of Public Health

PERMIT # EH 2204-0007 Operation Permit
□ New Installation □ Septic Tank ☑ Nitrification Line ☑ Repair □ Expansion
PROPERTY LOCATION: SK /125 Lamuel Black RD
Name: (owner) Tricon Residential SUBDIVISION Contexest LOT # 12
System Installer:
Basement with plumbing: Garage Mumber of Bedrooms
Type of Water Supply: Community Public Well Distance from well feet System Type: 25% Reduction System Chamber 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.
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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.
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PERMIT COMPITIONS
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 II No II No II No II No No
If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation:
V. Other:
□ D-Box □ Pump □ Alarm □ H20Line □ PWR
Following are the specifications for the sewage disposal system on the above captioned property
Type of system: Conventional Other 1590 NOSDUCTUN Septic Tank: gallons Pump Tank: gallon gallon gallon conventional conv
Subsurface No. of exact length width of depth of Drainage Field ditches of each ditch feet ditches feet ditches inches
French Drain Required: Linear feet
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Authorized State Agent Date 10-27-22