Harnett County Department of Public Health

PERMIT # EH 2402-0019 Operation Permit

	PROPERTY LOCATION: 30 Morgan Dr. (on Line Kepair L Expansion
Name: (owner) Sherry Raynor	SUBDIVISION	LOT #
System Installer: CASTERN Septic		
Basement with plumbing: ☐ Garage ☐ Number of Bedro	oms 2 (4Deaple)	
Type of Water Supply: Community Public W		
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 expira	tion for permit renewal.
This system has been installed in compliance with applicable North Carolina Gener	al Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improveme	ent Permit and Construction Authorization.
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DEDUKT CONDITIONS	7	
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with	Pulo 1961	
Performance: System shall perform in accordance with Monitoring: As required by Rule .1961.	Aute .1701.	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes		
	operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
□ D-Box □ P	ump 🗆 Alarm 🗆 H2	20Line PWR Line
Following are the specifications for the sewage disposal system or	the above captioned property.	
Type of system: Conventional Other 25% red	VCTION IOY Septic Tank: 1000 ga	allons Pump Tank: gallons
Subsurface No. of exact	length width of 7	depth of
Drainage Field ditches of ea	ch ditch	ditches 29 inches
French Drain Required: Linear feet	4	
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Authorized State Agent	Mah & REtts Date	> - 1