## Harnett County Department of Public Health

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PERMIT # EH2406-000Z	Operation Permit	
		Nitrification Line 🗹 Repair 🗆 Expansion
	PROPERTY LOCATION: SU250 TIL	
Name: (owner) TONY McNex/	SUBDIVISION	
System Installer: Hal Brown		
Basement with plumbing: Garage Mumber of Bedrooms	_3	
Type of Water Supply:   Community Public Well	Distance from well feet	
System Type: 25% Retriction System Cha		
(In accordance with Table V a)	Owner must contact Health Department 6 months p	prior to expiration for permit renewal.
This system has been installed in compliance with applicable North Carolina General St	atutes, Rules for Sewage Treatment and Disposal, and all conditions	of the Improvement Permit and Construction Authorization.
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	36	FOR FINAL. See PLOTOS
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PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance with Rule	.1961. St 1250 TEM CVANIA	1 88
II. Monitoring: As required by Rule .1961.	SCIEBO I DE COMON	
III. Maintenance: As required by Rule .1961. Other:	И. П	
Subsurface system operator required? Yes If yes, see attached sheet for additional oper		
IV. Operation:	tion conditions, maintenance and reporting.	
V. Other:		
□ D-Box □ Pum	p 🗆 Alarm 🖂	H20Line  PWR Line
Following are the specifications for the sewage disposal system on the	11 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Cordons
Type of system:  Conventional  Other 25% REDUC		gallons Pump Tank: gallons
Subsurface No. of I exact len	gth 240-225 width of	depth of
Drainage Field ditches 6 of each of	litch <u>46</u> feet ditches <u>3</u>	feet ditches 24 inches
French Drain Required: Linear feet		
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Authorized State Agent	-E #5 Dar	te 6-19-24