## Harnett County Department of Public Health

PERMIT # EH 2507 - 0616 Operation Permit	
□ New Installation □ Septic Tank □ Nitrification Line □ Repair □ Expai	nsion
PROPERTY LOCATION: 32/412 Chaisfron Laght izo	151011
Name: (owner) EVAN JONES SUBDIVISION LOT #	
System Installer: DREW HINSLAW	
Basement with plumbing:  Garage  Number of Bedrooms	
Type of Water Supply:  Community Public Well Distance from well feet	
System Type: Thore Toplace man 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.	
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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 No	
If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:	
V. Other:	
D-BoxPumpAlarmH20LinePN	WR Line
Following are the specifications for the sewage disposal system on the above captioned property.	
	allons
Subsurface No. of exact length width of depth of	
Drainage Field ditches of each ditch feet ditches inches	S
French Drain Required: Linear feet	
SMI FEETER	
Authorized State Agent Jones - 1/Anhan Date 9-11-25	