

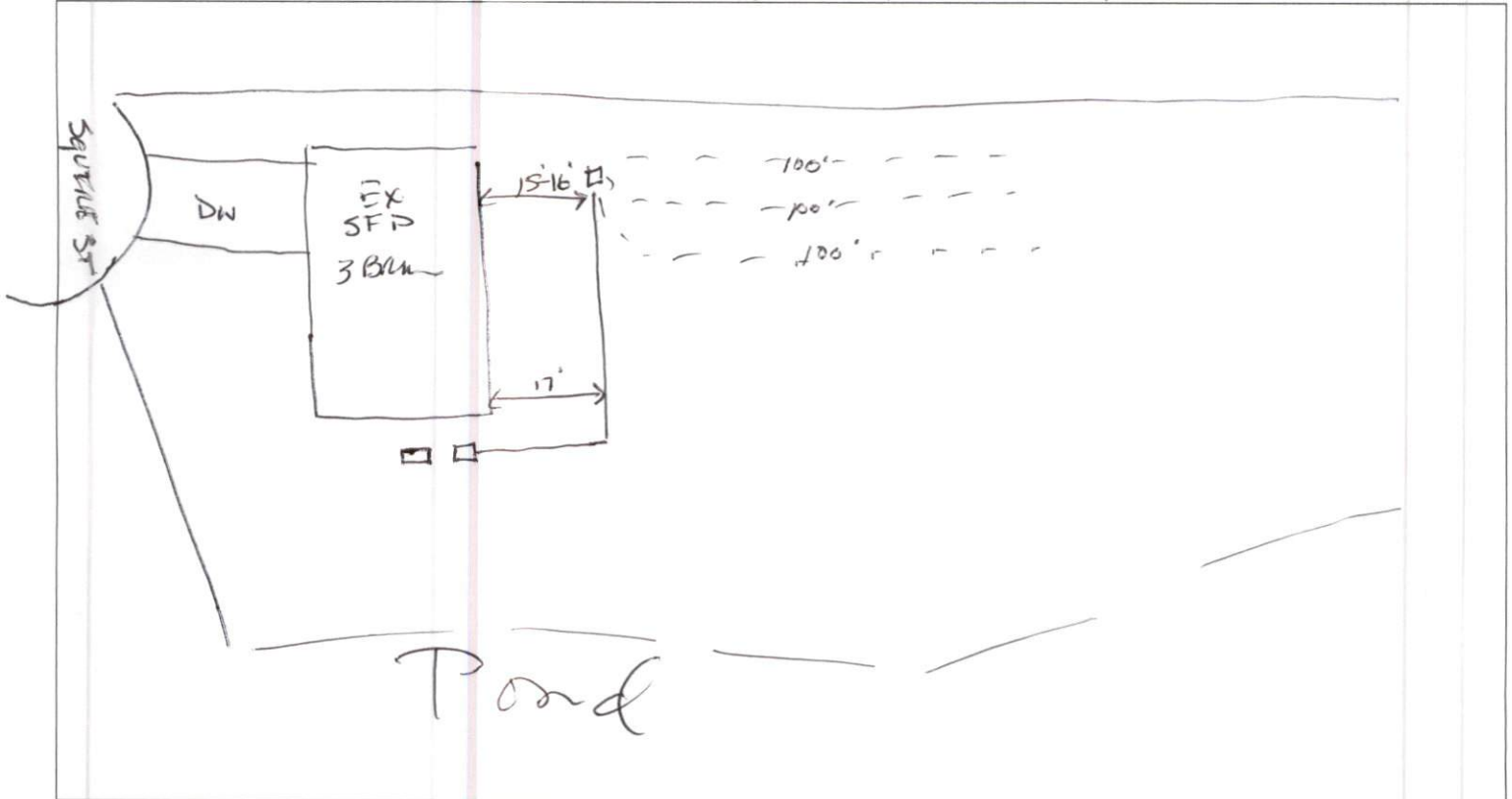
Harnett County Department of Public Health

PERMIT # EH2508-0016

Operation Permit

☐ New Installation ☐ Septic Tank ☒ Nitrification Line ☐ Repair ☒ Expansion
PROPERTY LOCATION: 511425 Chalybeate RDName: (owner) DAVID Thomas MooreSUBDIVISION Avery Pond LOT # 23System Installer: Clint AdamsBasement with plumbing: ☐ Garage ☒ Number of Bedrooms 3Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well _____ feetSystem Type: Replace Piece of EZ Flow Types V and VI Systems expire in 5 years.(In accordance with Table V a) MOVES supply LEAK 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.



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 ☐

If yes, see attached sheet for additional operation conditions, maintenance and reporting.

IV. Operation: _____

V. Other: _____

☐ _____ D-Box ☐ _____ Pump ☐ _____ Alarm ☐ _____ H2O Line ☐ _____ PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: ☐ Conventional ☒ Other Replace 10' segment of EZ Flow Septic Tank: Ex gallons Pump Tank: Ex gallonsSubsurface No. of exact length width of depth of
Drainage Field ditches 1 of each ditch 10 feet ditches 3 feet ditches _____ inches

French Drain Required: _____ Linear feet

Authorized State Agent James E. Manhart REGASDate 9-24-25