## Harnett County Department of Public Health

No. 26342

PERMIT # NA

Operation Permit

	New Installation  Septic Tank  Nitrification Line  Repair	
	PROPERTY LOCATION: 3005 PAINGROUND DO (SI	
Name: (owner) Int MANAGNG MODILLE		# 2
System Installer: CON GILBERT	Registration #	
Basement with plumbing:  Garage Number of Bedrooms		
Type of Water Supply:   Community Public Well		
System Type: 25% NEDUCTION 575.		
(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:	(sofirs) as account	
Subsurface system operator required? Yes 🗆 N		
If yes, see attached sheet for additional operation	ation conditions, maintenance and reporting.	
IV. Operation:		
Y. Other:		_
□ D-Box □ Pump	p 🗆 Alarm 🗆 H20Line 🗆	PWR Line
Following are the specifications for the sewage disposal system on the	e above captioned property.	
Type of system:   Conventional Other EZ R		gallons
Subsurface No. of exact leng	gth width of depth of	
	ditch 80 feet ditches 3 feet ditches 22	inches
French Drain Required: Linear feet		
631.42.24		
Authorized State Agent	Date 63   5   202	