Harnett County Department of Public Health

PERMIT # SFD 2101-0040 Operat	tion Permit
	tion Septic Tank Nitrification Line Repair Expansion
	LOCATION: 2215 Rosson Pollmanks
Name: (owner) Landay Burlows SUBDIVIS	
System Installer: Cony Colbert	
Basement with plumbing: 🗆 / Garage 🔛 Number of Bedrooms 📑	
Type of Water Supply: Community Public Well Distance from well System Type: 252 Provided TT G & Zung	feet _ Types V and VI Systems expire in 5 years.
	t 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 Tre	
	340 of 25% INSTALLED
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	J-011-65-
DEDMIT COMPITIONS.	215 Kossen PettmanZD
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, maint IV. Operation:	tenance and reporting.
n. Operation.	
V. Other:	
□D-Box □Pump □	
Following are the specifications for the sewage disposal system on the above captioned projections of systems	
Type of system: Conventional Other 25% Red 1821 My Subsurface No. of exact length	Septic Tank: 1000 gallons Pump Tank: gallons width of depth of
Drainage Field ditches of each ditch 3 40	100 to 10
French Drain Required: Linear feet	
· M · A	AT REAS
Authorized State Agent American Manhand	Date