## Harnett County Department of Public Health

PERMIT # <u>SFD21000111</u>	Operation Permit	
	New Installation Septic Tank Mitrification Line Re	pair   Expansion
	PROPERTY LOCATION: 4731 NC 277	
Name: (owner) PAUL LYON		LOT #
System Installer: LARRY SHARPE		
	Bedrooms	
Type of Water Supply:   Community Public	□ Well Distance from well feet	
System Type: 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.		
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This system has been installed in compliance with applicable North Carolina General Statustes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.		
	REPAIR AREA HOUSE 10 DR VE	
PERMIT CONDITIONS:	with Bula 1941	
<ol> <li>Performance: System shall perform in accordance</li> <li>Monitoring: As required by Rule .1961.</li> </ol>	. mun nanc .1/VI.	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator require	d? Yes 🗆 No 🔀	
IV. Operation:	tional operation conditions, maintenance and reporting.	
V. Other:		
□ D-Box □	Pump	PWR Line
Following are the specifications for the sewage disposal sys	stem on the above captioned-property.	
Type of system:   Conventional   Other	Septic Tank: 1850 gallons Pump Tank: _	gallons
Subsurface No. of	exact length 500 width of 2 depth of	24 :
Drainage Field ditches	of each ditch feet ditches feet ditches	inches
French Drain Required: Linear feet		
Authorized State Agent	1/9/23 Date 1/9/23	
Authorized State Agent_		