Harnett County Department of Public Health

PERMIT # SFD 2105- 0031 **Operation Permit** 🛮 New Installation 🔼 Septic Tank 🔁 Nitrification Line 🗆 Repair 🗆 Expansion PROPERTY LOCATION: 344 COUNTRYSIDE Dr (SR 1116) H+H CONSTRUCTORS SUBDIVISION System Installer: Garage Number of Bedrooms Basement with plumbing: Type of Water Supply:

Community M Public ☐ Well Distance from well Types V and VI Systems expire in 5 years. System Type: (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. 481 PERMIT CONDITIONS: System shall perform in accordance with Rule .1961. 1. Performance: II. Monitoring: As required by Rule .1961. As required by Rule .1961. Other: III. Maintenance: Subsurface system operator required? Yes \square No \boxtimes If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: Alarm H20Line **PWR Line** D-Box Pump Following are the specifications for the sewage disposal system on the above captioned property. 25 % reduction (FQ4) Septic Tank: 1000 gallons Pump Tank: gallons Other Type of system:

Conventional exact length width of depth of Subsurface No. of

of each ditch 242 feet ditches ditches ditches Drainage Field French Drain Required: Linear feet 7-20-22 REHS Date Authorized State Agent