Harnett County Department of Public Health

Operation Permit PERMIT # SFT 2105-0057 New Installation Septic Tank Nitrification Line Repair Expansion PROPERTY LOCATION: 45 FORM PORD Dr. (US 401ND) MONGAN NONTH LOT # 574 Name: (owner) D. M. HONTON INC. SUBDIVISION JASGN MATTHEWS System Installer: Basement with plumbing: Garage 📈 Number of Bedrooms ___ Type of Water Supply:

Community

Public

Well System Type: 25% EDICTION S.S. III g Types V and VI Systems expire in 5 years. (In accordance with Table V a) Owner must contact Health Department 6 months prigr 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. 25% reg. 180a. 1 Anax * GADITY TO DISOX TEWAR DISTUBLICON 10 10 PERMIT CONDITIONS: System shall perform in accordance with Rule . 1961. 1. Performance: II. Monitoring: As required by Rule . 1961: FARM III. As required by Rule .1961. Other: Maintenance: Subsurface system operator required? Yes
No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: D-Box □______Pump □_____Alarm □ H20Line **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. & Other EZ FLOW Illg Type of system:

Conventional Septic Tank: ______ gallons Pump Tank: __ depth of Subsurface No. of exact length width of ditches 16 inches Drainage Field ditches of each ditch 120 feet ditches French Drain Required: Linear feet 11/16/2021 Date Authorized State Agent