Harnett County Department of Public Health

PERMIT # 5FD 2165-0063	Operation Permit
ļ	New Installation Septic Tank Mitrification Line Repair Expansion
	PROPERTY LOCATION: Hay 401 N SUBDIVISION Mongan FARA North LOT # 52
Name: (owner) DR Honton III	SUBDIVISION Mongan FARA North LOT # 52
System Installer: Tran Matthews	-U
Basement with plumbing: ☐ Garage ☐ Number of Bedrooms _ Type of Water Supply: ☐ Community ☐ Public ☐ Well	Distance from wellfeet
System Type: Pap to 25% RED System 122	
(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 Statu	tes, Rules for sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
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PERMIT CONDITIONS:	Con spe
I. Performance: System shall perform in accordance with Rule .	961.
II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes 🗆 N	
If yes, see attached sheet for additional operation:	on conditions, maintenance and reporting.
V. Other:	
□ D-Box □ Pump	□ Alarm □ H20Line □ PWR Line
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other Other System System Source Source Source Septic Tank: 1000 gallons Pump Tank: Other Source S	
Type of system: Conventional 1 Other 1525 1757 Other exact length	width of depth of
Drainage Field ditches of each dit	
French Drain Required: Linear feet	
Authorized State Agent ares & Manha	Date Date