Harnett County Department of Public Health

PERMIT # SFD 2108-0081 **Operation Permit** New Installation Septic Tank Mitrification Line Repair Expansion PROPERTY LOCATION: 6/ Red Pine Gr. (SR 1209) SUBDIVISION Camaron Woods LOT # 19 Name: (owner) System Installer: Garage Number of Bedrooms Basement with plumbing: N Public Type of Water Supply:

Community ☐ Well Distance from well Types V and VI Systems expire in 5 years. Type III B (In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal. Curtain Drain 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. 41'x49' 481 PERMIT CONDITIONS: System shall perform in accordance with Rule .1961. Performance: II. Monitoring: As required by Rule .1961. As required by Rule .1961. Other: III. Maintenance: Subsurface system operator required? Yes 🗆 No 🔀 If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: **PWR Line** □ Alarm □ ____ **H20Line** D-Box □ _____ Pump Following are the specifications for the sewage disposal system on the above_captioned property. Other 25 % reduction I ay gallons Pump Tank: 1000 Septic Tank: 1000 gallons Type of system:

Conventional depth of Subsurface No. of exact length of each ditch feet ditches inches ditches Drainage Field ditches French Drain Required:

RELYS

Authorized State Agent

Date