## Harnett County Department of Public Health

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PERMIT # <u>SPD 2105-0</u> 073	Operation Permit	
✓ New Installation ✓ Septic Tank ✓ Nitrification Line ✓ Repair ✓ Expansion		
	PROPERTY LOCATION: 4mg 4015	
Name: (owner)	SUBDIVISION WEllows Form	LOT # _5
System Installer: Genner Sighic		
Basement with plumbing:  Garage Mumber of Bedrooms 4		
Type of Water Supply:  Community Public Well Distance from well feet  System Type:  7500 Peleology System Charles 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 Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.		
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PERMIT CONDITIONS:		
Performance: System shall perform in accordance with Rule	.1961.	
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes 🔲 I If yes, see attached sheet for additional opera		
IV. Operation:	tion conditions, maintenance and reporting.	
V. Other:		
□ D-Box □ Pump		Line  PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.  Type of system:  Conventional Other 1502 Yest 54546 Septic Tank: 1000 gallons Pump Tank: gallons		
Type of system: Conventional Other 750 YCAL Subsurface No. of exact leng		ons Pump Tank: gallons depth of
	tch 196 feet ditches 5 feet	ditches 22-78 inches
French Drain Required: Linear feet		
54	Date 3	
Authorized State Agent	Date 3	5-17-22