Harnett County Department of Public Health

PERMIT # SFD 2206-0076	Operation Permit
	New Installation 🔼 Septic Tank 🗷 Nitrification Line 🗆 Repair 🗀 Expansion
	PROPERTY LOCATION: 189 Rain Beck was (US 4015)
Name: (owner)	PROPERTY LOCATION: 189 Parmy Back way (US 4018) LOT # 57
System Installer: GACAL	- Septic
Basement with plumbing: Garage 🔀 N	umber of Bedrooms
Type of Water Supply: Community P	
	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.
This system has been installed in compliance with applicable	orth 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:	
I. Performance: System shall perform in a II. Monitoring: As required by Rule .1961	
III. Maintenance: As required by Rule .1961	
	required? Yes 🗆 No 🔀
	for additional operation conditions, maintenance and reporting.
IV. Operation:	
V. Other:	
NO (2003)	
□ D-Box □	Pump
Following are the specifications for the sewage dis	4 OT U - CA
Type of system: Conventional Othe Subsurface No. of	exact length width of depth of
Drainage Field ditches	exact length of depth of ditches 3 feet ditches 29 inches
French Drain Required:	Linear feet
. 1	N
Authorized State Agent	h M REtb Date 12-29-22