## Harnett County Department of Public Health

PERMIT #595 2	2208 - 0010 Operation Permit	
	New Installation Septic Tank IN Nitrification Line I Repair I Expa	ncion
	PROPERTY LOCATION: Sc/437 Balland RS	1121011
Name: (owner)		0
, ,		7_
System Installer:		
Basement with plumbing:		
Type of Water Supply:		
	Types V and VI Systems expire in 5 years.	
(In accordance with Table	le 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 Statutes Aud for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.	
inis system has been histaned	In compliance with applicable North Carolina General Statutes North Seriage Treatment and Disposary and an Conditions of the Improvement Perint and Construction Authorization,	$\rightarrow$
	Marine 1	
	10 top million	
	(0) (1)	
	36 p 10 \$t	
	16\$6	
	2 / / / / / / / / / / / / / / / / / / /	
	\ & \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	\ 5 / / / //	1.1
		12
	to po A / To D-BOY	4.3
	38un 6.	
	3(1)	
	la Pt - 4	
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	Cul De	
PERMIT CONDITIONS:		
	System shall perform in accordance with Rule .1961.	
	As required by Rule .1961.	
	As required by Rule .1961. Other:	
	Subsurface system operator required? Yes No	
	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:	n yes, see attached sheet for additional operation conditions, maintenance and reporting.	
iv. Operation.		
V. Other:		
		WR Line
Following are the specific	ications for the sewage disposal system on the above captioned property.	
Type of system:   Co		rallens
		gallons
	No. of exact length width of depth of depth of ditches 3 feet ditches 1876 inche	0.0
French Drain Required:	Linear feet  Linear feet  Linear feet	13
Fram nequired.		
	Markon F ZBAS Date 5-31-23	1 1
Authorized State Ages	Date 5-31-23	. 1