Harnett County Department of Public Health

PERMIT # SFD 2208-0013 **Operation Permit** New Installation Septic Tank Nitrification Line Repair Expansion GALT Land Development SUBDIVISION Liberty Meadows LOT # 19 Name: (owner) System Installer: Garage Mumber of Bedrooms Basement with plumbing: Type of Water Supply:

Community

Public

Well Distance from well Types V and VI Systems expire in 5 years. System Type: Owner must contact Health Department 6 months prior to expiration for permit renewal. (In accordance with Table V a) 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. FUTUR 508 PERMIT CONDITIONS: System shall perform in accordance with Rule .1961. I. Performance: As required by Rule .1961. II. Monitoring: III. As required by Rule .1961. Other: Maintenance: Subsurface system operator required? Yes □ No 🗵 If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: ٧. Other: Alarm 🗆 ______ H20Line **PWR Line** D-Box □ Pump Following are the specifications for the sewage disposal system on the above captioned property. Septic Tank: 1000 __ gallons Pump Tank: 25% reduction IQU gallons Type of system:

Conventional X Other exact length Subsurface No. of of each ditch _ 300 inches Drainage Field ditches French Drain Required: Linear feet Date 12-9-22 RCHU Authorized State Agent