## Harnett County Department of Public Health

PERMIT # JFP 2	2708-0019	<b>Operation</b>	Permit		
				ification Line 🗆 Repair 🗆	Expansion
		PROPERTY LOCA	TION: ON 1700 CANE		
Name: (owner) <u>Se</u>	wer Magnotias Con	SUBDIVISION		LOT # _	313
System Installer:	Genes Brokhae				
Basement with plumbing:					
	Community Public Well				
System Type: 300 Nod System PPOS Types V and VI Systems expire in 5 years.  Owner must contact Health Department 6 months prior to expiration for permit renewal.					
And the control of th					
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.					
	Joseph NE DIE NE	Tio	Area 100		
or Care mill RD					
PERMIT CONDITIONS:	to the state of the second section of the section	10/1		ř	
	System shall perform in accordance with Rule As required by Rule .1961.	.1701.			
	As required by Rule .1961. Other:				
	Subsurface system operator required? Yes				
IV. Operation:	lf yes, see attached sheet for additional opera	ation conditions, maintenance	and reporting.		
iv. Operation.					
V. Other:					
	D-Box Pump	o 🗆	Alarm 🗆	H20Line	PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.					
Type of system: Co	onventional & Other <u>SOPW F</u> No. of exact leng		Septic Tank: 1000 width of	gallons Pump Tank:	gallons
	ditches of each d		ditches 3	depth offeet ditches1e-zw	inches
French Drain Required: _	Linear feet				
Authorized State Agent Date 6-9-23					
Authorized State Age	AL Jones (/V)	Andard	Date	6-9-23	