Harnett County Department of Public Health

PERMIT # <u>SFD2302</u> -0071 <u>Operation Permit</u> New Installation Septic Tank Nitrification Line Repair Exp	ansion
Name: (owner) KMB BULLOING SUBDIVISION LOT # System Installer: Garage Number of Bedrooms 3 Type of Water Supply: Community Public Well Distance from well feet System Type: 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 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:	
I. 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 If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:	
V. Other:	
	PWR Line
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other EZ FLOW Septic Tank: Septic Tank:	gallons
Subsurface No. of exact length width of depth of	Ballolls
Drainage Field ditches of each ditch 180 feet ditches 3 feet ditches 24-18 inch	es
Authorized State Agent Date G 2 23	