Harnett County Department of Public Health

PERMIT # 5F02303-0017	Operation Permit
	New Installation Septic Tank Nitrification Line Repair Expansion
2 / 2	PROPERTY LOCATION: 112 SEARS DR
Name: (owner) GALT LAND DEV	SUBDIVISION LIBERTY MEADONS LOT # 24
System Installer: Grave Seric Basement with plumbing: Garage X Number of Bedrooms	3
Basement with plumbing: Garage Number of Bedrooms 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 St	atutes, 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:	
III. Maintenance: As required by Rule .1961. Other:	No.×
IV. Operation: If yes, see attached sheet for additional operation:	tion conditions, maintenance and reporting.
V. Other:	
□ D-Box □ Pump	□Alarm □H20Line □PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.	
Type of system: Conventional Other CHAMS Subsurface No. of exact lens	
Drainage Field ditches of each d	tch 180 feet ditches 3 feet ditches 18-22 inches
French Drain Required: Linear feet	
Authorized State Agent	Date 9 20 23