Harnett County Department of Public Health

PERMIT # 5FD 2204-0019

Operation Permit

	New Installation	xpansion
	PROPERTY LOCATION: 275 Beacon Hill Rd (SR 1291)	
Name: (owner) New Home Inc	SUBDIVISION Dyncars Creck LOT #_	20
System Installer: Dennis medlin	1/2-1/	
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 Sta	atutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization	ı.
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6	TU'E WITTON WITH	
1	25% Main Line	
	300' 00	
90'		
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
70'	148'	
10' 60'		
40'		
	<i>i</i>	
(
(2	192 X 60	
	400	
39'		
(400)		
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DEDMIT CONDITIONS.		
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule	Beacon Hill Rd	
 Performance: System shall perform in accordance with Rule Monitoring: As required by Rule .1961. 	.1701.	
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes	No ISt	
If yes, see attached sheet for additional opera		
IV. Operation:		
V. Other:		
□ D-Box □ Pump	o 🗆 Alarm 🗆 H20Line 🗆	PWR Line
Following are the specifications for the sewage disposal system on the		
Type of system: Conventional Other 25% reduces		gallons
Subsurface No. of exact leng	gth width of depth of	
	itch <u>300</u> feet ditches <u>3</u> feet ditches <u>22</u>	inches
French Drain Required: Linear feet		
n/	<u> </u>	
Authorized State Agent	MREHS Date 2-9-24	