Harnett County Department of Public Health

PERMIT # SFD 2305-0074	Operation Permit	
	New Installation & Septic Tank M Nitrification Line Repa	air Expansion
	PROPERTY LOCATION: 130 Clyde Dog CT (SR1253	7)
Name: (owner) Smith Doug	PROPERTY LOCATION: 130 Clyde Dog CT (SR1253	OT # 2Z
System Installer: A+R		
Basement with plumbing: Garage Number	er of Bedrooms 3 (6 people)	
	☐ Well Distance from well feet	
System Type: Type The	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 renewa	il.
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.
PERMIT CONDITIONS:	74'74' 78' FUNDA'	
I. Performance: System shall perform in accord	ance with Rule .1961.	
II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other	har	
III. Maintenance: As required by Rule .1961. Oth Subsurface system operator req	ner:	
	additional operation conditions, maintenance and reporting.	
IV. Operation:	10	
V Other		
V. Other:		
D-Box -	Pump	PWR Line
Following are the specifications for the sewage disposal Type of system: Conventional Other	system on the above captioned property. 25 Total CT 10 A TOY Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface No. of	exact length width of depth of	
Drainage Field ditches/	of each ditch 226 feet ditches 3 feet ditches 26	inches
-	ear feet	
Authorized State Agent Make	Date 8-11-23	