

Harnett County Department of Public Health

PERMIT # SFD 2306-0048

Operation Permit

- New Installation
- Septic Tank
- Nitrification Line
- Repair
- Expansion

PROPERTY LOCATION: 32207 Clayhale Rd

Name: (owner) Coney Ammons SUBDIVISION _____ LOT # 2

System Installer: Coney Gilbert

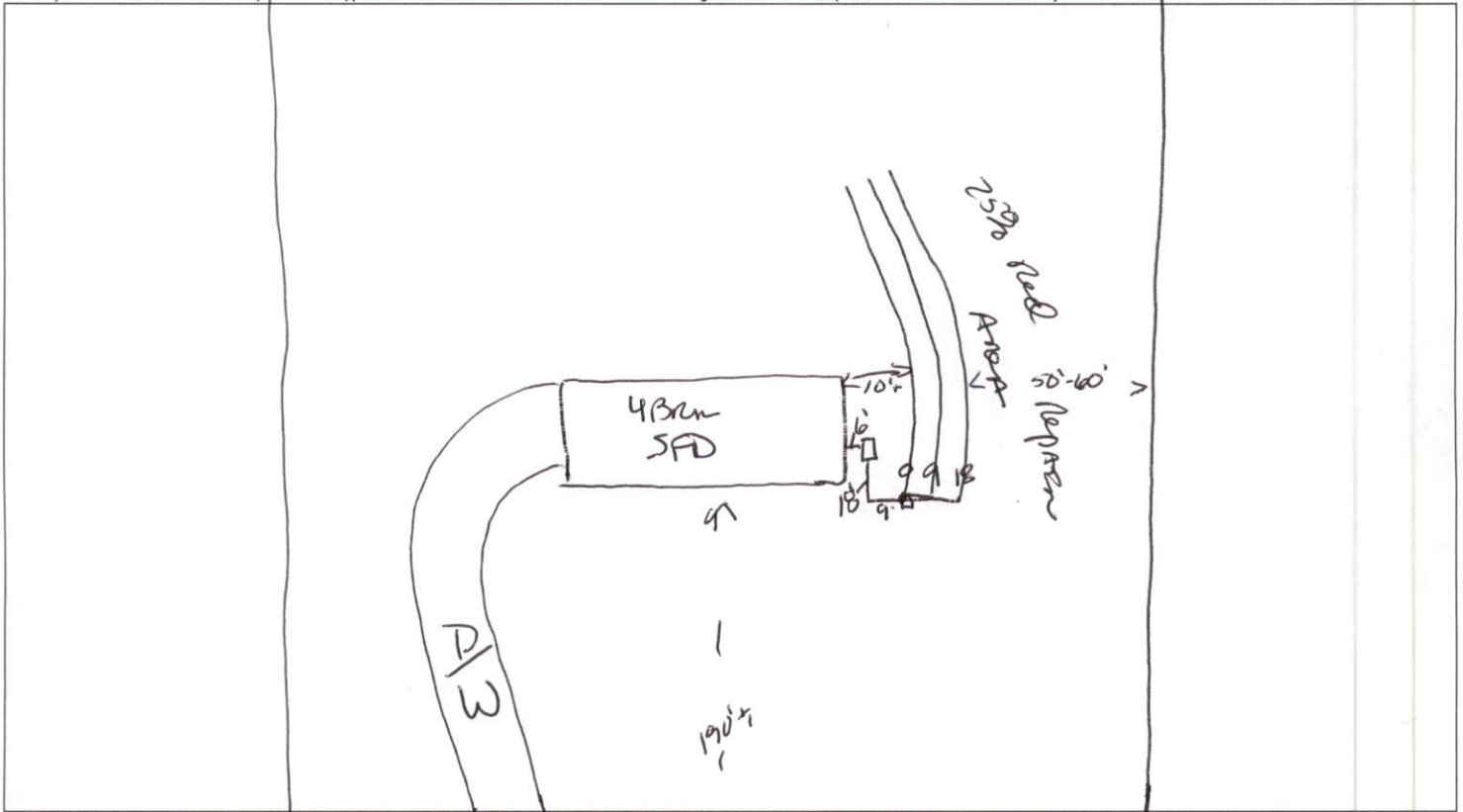
Basement with plumbing: Garage Number of Bedrooms 4

Type of Water Supply: Community Public Well Distance from well _____ feet

System Type: 25% Reduction Septer Type 6 BZ Plan 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.



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: OUT TO 52207
Subsurface system operator required? Yes No
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

D-Box Pump Alarm H2O Line PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other 25% REDUCED Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface No. of exact length width of depth of
 Drainage Field ditches 3 of each ditch 135 feet ditches 3 feet ditches 22-18 inches
 French Drain Required: _____ Linear feet

Authorized State Agent James E. Markant Date 1-2-24