Harnett County Department of Public Health

PERMIT # 5FD 2309 - 0031

Operation Permit

New Installation Septic Tank Nitrification Li	ne Repair Expansion
Name: (owner) Smith Douglas Homes SUBDIVISION Duccans Crossing	LOT # 40
System Installer: AFK	
Basement with plumbing: Garage Number of Bedrooms 4 (8 people)	
Type of Water Supply: Community Distance from well feet	
System Type:	
(In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for	r 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 Perm	nit and Construction Authorization.
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11 1	
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7 38'x 40'	
1 4Br	
901	
(21)	
137'	
PERMIT CONDITIONS: Decay Sound Pl	
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 No No	
If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:	
V. Other:	
□ D-Box □ Pump □ Alarm □ H20Line	□ PWR Line
Following are the specifications for the sewage disposal system on the above captioned property.	
	Pump Tank: gallons
Subsurface No. of exact length width of Drainage Field ditches 1 feet ditches 3 feet	depth of ditches 24 inches
French Drain Required: Linear feet	indica indica
101 1 00	
Authorized State Agent Mah Me REH) Date 11-16-	23