Harnett County Department of Public Health

PERMIT # 5FD	2310 -0052	Ø		Septic Tank	Nitrification Line	□ Repair □ E	Expansion
Name: (aumar) 1	Family Buddery	1- 111		110N: 501418		10T #	,
	1. 11 4 4	CO ILL	ZORDIAIZION	CAPTHENS	Candley	LOT #	/
System Installer: _ Basement with plumb		Bedrooms	3		O		
Type of Water Supply			tance from well	feet			
System Type: 25%	& REDUCTION Syste			V and VI Systems ex	coire in 5 years.		
(In accordance with 1					ths prior to expiration for p	permit renewal.	
		C	homber avo	K-4			
This system has been insta	alled in compliance with applicable North Carolin	a General Statutes,	Rules for Sewage Treatment	and Disposal, and all condi	1/	and Construction Authorization	1.
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DERMIT COMPUTIONS							
PERMIT CONDITIONS: I. Performance:	System shall perform in accordance	with Rule 106	Ĭ.				
II. Monitoring:	As required by Rule .1961.	with Nuie .1701	1.				
III. Maintenance:	As required by Rule .1961. Other:						
	Subsurface system operator required			***************************************			
	If yes, see attached sheet for additi	ional operation	conditions, maintenance	and reporting.			
IV. Operation:			II————————————————————————————————————				
w							
V. Other:							
	D-Box 🗆	Pump [Alarm 🗆	H20Line		PWR Line
Following are the spe	cifications for the sewage disposal syst	em on the abov	e captioned property.				
Type of system:	Conventional Other	pto	25% 130	Septic Tank: _	2000 gallons Pun	np Tank: _1000	gallons
Subsurface	No. of	exact length	300	width of		pth of	
Drainage Field	ditches	of each ditch _	500 feet	ditches	feet di	tches 18-20"	inches
French Drain Required	d: Linear fo	3et					
	Au-	2	Prus		. /./	. 54.	
Authorized State A	igent	" A	EHS		Date	24	