Harnett County Department of Public Health

PERMIT # SFD 2	310-0060 Operation Permit
	New Installation Septic Tank Initrification Line Repair Expansion
	PROPERTY LOCATION: SR 1417 Bakertown Rd,
Name: (owner)	New Home Inc Subdivision week Bridge South LOT # 36
	Penis medlin
Basement with plumbir	ng: Garage Mumber of Bedrooms
Type of Water Supply:	
(In accordance with Ta	Bedaction System EZ Flow Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewal.
(iii accordance with ra	bile Y a)
This system has been install	ed 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:	Pump 25.1. Red Reprice Signal
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 \(\sime\) No \(\sime\) If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:	
V. Other:	
	D-Box □ Pump □ Alarm □ H20Line □ PWR Line
	ifications for the sewage disposal system on the above captioned property.
Type of system:	
Subsurface Drainage Field	No. of exact length width of , depth of ditches feet ditches feet ditches inches
French Drain Required:	
Authorized State A	C M 1 1 1 TETERS 1 D. / 1