Harnett County Department of Public Health

PERMIT # SFD 23	17-0043 Operation Permit	
	Mew Installation Septic Tank Witrification Line Repair Exp	ansion
	PROPERTY LOCATION: 145 HOGO Rd, HOLLY Springs SOLLING HOMES SUBDIVISION LOT #	
Name: (owner) 5:9	souture Homes SUBDIVISION LOT #	4
System Installer: Cor		
Basement with plumbing:		
Type of Water Supply:	Community Public Well Distance from well feet	
System Type: 25%	Reduction Type III (g) EZ Flow 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 makes has been installed in	o compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.	
	Repair Ace a desired of the second of the se	
	Hoppy	
PERMIT CONDITIONS: I. Performance: Sy	stem shall perform in accordance with Rule .1961.	
	s required by Rule .1961.	
	s required by Rule .1961. Other:	
	ubsurface system operator required? Yes No	
	yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
	D-Box	PWR Line
	ations for the sewage disposal system on the above captioned property.	
Type of system: Con		gallons
	o. of exact length of exact length of depth of depth of of each ditches $\frac{4}{18^{12}-20^{11}}$ includes $\frac{4}{18}$ feet ditches $\frac{18^{12}-20^{11}}{18}$ includes $\frac{1}{18}$	6
Drainage Field di French Drain Required:	tches of each ditch feet ditches feet ditches incl Linear feet	nes
Tenen Fram nequired.	1 / 1	
Authorized State Agen	1 Na REHS Date 5-17-24	_