Harnett County Department of Public Health

narnett Cou	nty Department of Public Health
PERMIT # SFD 2401-0065	Operation Permit
<u> </u>	New Installation Septic Tank Nitrification Line , Repair Expansion
	PROPERTY LOCATION: 187 Golden Leaf Rd,
Name: (owner) Drees Homes company	SUBDIVISION TO GACLE ROAD LOT # 17
System Installer: Full Circle	
Basement with plumbing: ☐ Garage ☐ Number of Bedrooms _ Type of Water Supply: ☐ Community ☐ Public ☐ Well	Distance from well feet
System Type: 25%. Reduction Type III(b)	EZ Flow Types V and VI Systems expire in 5 years.
	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 Statuto	es, Rules for Source Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
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* Needs Pump + Alarm	en'
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2	10-11
* Need to see If Manifold	legi
was moved to meet 10 sett	rack lear
Was world to meet 10' Settle CHIS 6' From property Line at line of In	speller 50'
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	701
	29.8
	The CEP
	5-BK
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PERMIT CONDITIONS:	
I. Performance: System shall perform in accordance with Rule . I	Golden Leaf Facus Kd
II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes \(\sigma\) No	
If yes, see attached sheet for additional operation	n 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 al	pove captioned property. b) 62 F10 W Septic Tank: 1,290 gallons Pump Tank: 1,200 gallons
Type of system: Conventional Other Type TTLU Subsurface No. of exact length	width of depth of
Drainage Field ditches of each ditch	
French Drain Required: Linear feet	
Mu By	REHS Date 6-12-24
Authorized State Agent	16-17 Vate 0-12-27