Harnett County Department of Public Health

PERMIT # 5802403 -0004

Operation Permit

	New Installation Septic Tank Nitrification PROPERTY LOCATION: 196 Grand Griffon	on Line Repair Expansion
Name: (owner) Great Southern Homes	SUBDIVISION Griffon PoinTe	LOT # _18
System Installer: DBS	JODDINIJON TOTAL	
Basement with plumbing: Garage Number of Bedrooms	4 (8 semle)	
Type of Water Supply: Community Public Well	Distance from well feet	
System Type: TYPE TIEG	Types V and VI Systems expire in 5 years.	
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to expirat	tion for 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 Permit and Construction Authorization.		
45.		
I. Performance: System shall perform in accordance with Rule .	rand Griffon Way	
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes 🗆 N		
If yes, see attached sheet for additional operation:	on conditions, maintenance and reporting.	
V. Other:		
D-Box	□ Alarm □ H20	OLine - PWR Line
Following are the specifications for the sewage disposal system on the a		
Type of system: Conventional Other 256 red of Systems		lons Pump Tank: gallons
Subsurface No. of exact length Drainage Field ditches of each ditches	th 310 reet ditches 3 feet	depth of ditches 20 inches
French Drain Required: Linear feet	ieer diffiles leet	unclies inches
1 1 1		
Authorized State Agent Moh	REHS Date 9	-25-24