Harnett County Department of Public Health

| PERMIT # 5FD2403-0097 | Operation Permit New Installation ✓ Septic Tank ✓ Nitrification Line □ Repair □ Expan PROPERTY LOCATION: ○1 ○ US 4 2 1 | |
|--|--|-------------|
| Name: (owner) NEW Home Fore System Installer: Dealers Med | (Z) | |
| Basement with plumbing: Garage Number Type of Water Supply: Community Public System Type: 25% Resources System Type: 15% Resources With Table V a) | ☐ Well Distance from well feet | |
| | rolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. | <u></u> |
| LSS Pennit | Anga Anga 10't 10't 10't Durand Cuck 120 | |
| PERMIT CONDITIONS: I. Performance: System shall perform in accord: II. Monitoring: As required by Rule .1961. | nce with Rule .1961. | |
| III. Maintenance: As required by Rule .1961. Oth Subsurface system operator req | ired? Yes □ No □ | |
| IV. Operation: If yes, see attached sheet for a | Iditional operation conditions, maintenance and reporting. | |
| V. Other: | | |
| D-Box | | WR Line |
| Subsurface No. of Drainage Field ditches | | allons s |
| Authorized State Agent James | Markon 138 18505 Date 7-18-24 | |