## Harnett County Department of Public Health

PERMIT # SFD 2403-0113 **Operation Permit** New Installation 🔁 Septic Tank 🔁 Nitrification Line 🗌 Repair 🗆 Expansion PROPERTY LOCATION: 166 Coharie D- (52 1253) Name: (owner) Carroll ConsTrucTion Homes SUBDIVISION Sheloh System Installer: Carroll Garage Number of Bedrooms 3(602012) Basement with plumbing: Type of Water Supply: 

Community Public ☐ Well Distance from well Types V and VI Systems expire in 5 years. System Type: \_\_\_ (In accordance with Table V a) 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 Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. PERMIT CONDITIONS: Performance: System shall perform in accordance with Rule .1961. ١. II. As required by Rule .1961. Monitoring: III. As required by Rule .1961. Other: Maintenance: Subsurface system operator required? Yes I No If yes, see attached sheet for additional operation conditions, maintenance and reporting. Operation: Other: □ Alarm □ \_\_\_\_ H20Line D-Box Pump **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: 

Conventional 

Other 25 

Toluction 

Toluction Septic Tank: 1000 \_\_ gallons Pump Tank: Subsurface width of No. of exact length of each ditch Z40 ditches inches Drainage Field

Mah al REHS Authorized State Agent

Linear feet

French Drain Required: