Harnett County Department of Public Health

PERMIT # SFD 2494-0196 Operation Permit
New Installation 🔽 Septic Tank 🖾 Nitrification Line 🗆 Repair 🗀 Expansio
PROPERTY LOCATION: 45 Looping (4) Angier
Name: (owner) Dav: Ison Homes SUBDIVISION Tobacco Road LOT # 20
System Installer: Quality Seffic
Basement with plumbing: Garage
Type of Water Supply: Community Public Well Distance from well feet
System Type: 25% Red ref: on Type III(5) Tolicharbecs 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.
owner must contact nearth bepartment o 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 Impfovement Permit and Construction Authorization.
SP W. BK
PERMIT CONDITIONS:
I. Performance: System shall perform in accordance with Rule .1961. II. Monitoring: As required by Rule .1961.
III. Maintenance: As required by Rule .1961. Other:
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If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:
V. Other:
D-BoxPumpAlarmH20LinePWR I
Following are the specifications for the sewage disposal system on the above captioned property.
Type of system: Conventional Other Type Tles Septic Tank: 1000 gallons Pump Tank: gallon
Subsurface No. of exact length of exact length of each ditches
French Drain Required: Linear feet
1. /1. /- (2.16.04)
Authorized State Agent Date Date Date