## Harnett County Department of Public Health

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|---|--|
| PERMIT # 5FD2405-0095   | Operation Permit   |
|   | New Installation Septic Tank Nitrification Line Repair Expansion   |
| > 0 11  | PROPERTY LOCATION: 273 Howles Moore Ca   |
| Name: (owner) DR Horron   | SUBDIVISION Melean Place LOT # 32  |
| System Installer: Jason Marthews  |  |
| Basement with plumbing: ☐ Garage ➤ Number of Bedrooms   | 4 (8 Decaple)  |
| Type of Water Supply:  Community Public Well  |  |
| System Type: Type TII B   | 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.  |
| The same to be similar to the same of the | tatutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. |
| inis system has been installed in compilance with applicable North Carolina Generalis   |  |
| 90  | *Supply LENES INSTRUMSD 4-4-25   |
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| PERMIT CONDITIONS:  | Hawksmean  |
| 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:  Subsurface system operator required? Yes   | W- 🗆   |
| If yes, see attached sheet for additional oper  |  |
| IV. Operation:  | adon conditions, maintenance and reporting.  |
|   |  |
| V. Other:   |  |
| □ D-Box □ Pum   | p 🗆Alarm 🗆 H20Line 🗆 PWR Line  |
|   |  |
| Following are the specifications for the sewage disposal system on the Type of system:   Conventional Other 15 2 705  |  |
| Cubaudasa Na af   | 111 (  |
| Drainage Field ditches of each  | ditches 370 feet ditches 3 feet ditches 18 inches  |
| French Drain Required: Linear feet  |  |
| 1 1   | 1-32:-   |
| Authorized Coate Act  | 1 A 7548   |