Harnett County Department of Public Health

PERMIT # SFD 2406-0035

Operation Permit

PERMII # JPVZ4	06-0035	<u>operatio</u>			1 F .
		□ New Installation	n □ Septic Tank □ Ni	trification Line \square Kepair \square	Expansion
	000	PROPERTY LO	CATION: 360 Adams	trification Line Repair Repair Repair CT (SR 13	62)
Name: (owner)	CRD GROUP	ZORDIAIZIO	Honey CUTT Hills	L01 #	_3/
System Installer:	- +N				
Basement with plumbin	g: Garage No	mber of Bedrooms 4 (8 people) blic Well Distance from well	feet		
Type of Water Supply: System Type:			ypes V and VI Systems expire in 5	vears	
(In accordance with Tal	ble V a)		ealth Department 6 months prior t		
The second contraction of the second contract	,		to the second se	o trail	
This system has been installed	d in compliance with applicable No	rth Carolina General Statutes, Rules for Sewage Treatme	ent and Disposal, and all conditions of the	Improvement Permit and Construction Authoriza	ation.
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PERMIT CONDITIONS:		+ Adams Points	CT->		
I. Performance:	System shall perform in ac				
II. Monitoring:	As required by Rule .1961				
III. Maintenance:	As required by Rule .1961				
		required? Yes 🗆 No 🔯			
IV. Operation:	if yes, see attached sheet	for additional operation conditions, maintena	ince and reporting.		
iv. Operation.	-				
V. Other:					
X	D-Box	Pump	Alarm 🗆	H20Line □	PWR Line
		osal system on the above captioned propert			
Type of system:	Conventional Conventional Other	25 Ziduction Eflow	Septic Tank: 1080	gallons Pump Tank: 1000	gallons
Subsurface	No. of	exact length	width of	depth of	
Drainage Field	ditches	of each ditch 350 fee	t ditches3	feet ditches	inches
French Drain Required:		Linear feet			
	11/	1/		17.25	1 1 1
Authorized State Ag	ent	1-6///	Date	1-7-25	
		P+A only			