## Harnett County Department of Public Health

PERMIT # SFD 2406 - 0075	Operation Permit
TEMM III	
	New Installation Septic Tank Nitrification Line Repair Expansion
1/2/1/	PROPERTY LOCATION: 544 John Stark Dr
Name: (owner) KB Home	SUBDIVISION D: 1 ch wood Grove LOT # 25
System Installer: David Brantley	
Basement with plumbing: Garage Number of Bedroom	
Type of Water Supply:  Community Public Well System Type: 25% Reduction Type The	Distance from well feet EZ FIOU 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.
(iii accordance wan rable v a)	owner must contact health bepartment o months prior to expiration for permit renewal.
This system has been installed in compliance with applicable North Carolina General S	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
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PERMIT CONDITIONS:	JOHN STACK Dr
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	
If yes, see attached sheet for additional open	tion conditions, maintenance and reporting.
IV. Operation:	
V. Other:	
□ D-Box □ Pum	□ Alarm □ H20Line □ PWR Line
Following are the specifications for the sewage disposal system on th	above captioned property.
Type of system:  Conventional  Other Type III	
Subsurface No. of exact len	th width of depth of
	tch 300' feet ditches 3' feet ditches 20'' inches
French Drain Required: Linear feet	
1 - 1/	45//5
Authorized State Agent	EHS Date 9-23-24