Harnett County Department of Public Health

PERMIT # SFD 2406-0132

Operation Permit

FERRIII # 272	<u>U</u>	peration i crimit		
	New	Installation 🔼 Septic Tank 🔀	Nitrification Line Repair	☐ Expansion
Name: (owner) Southern Tou	PRO PRO	PERTY LOCATION: 116 BoyCo	: CT (SR 1221)	
Name: (owner) Southern Tou	ich homes	UBDIVISION Wat Preserve	LOT 7	# 43
System Installer:				
Basement with plumbing: ☐ Garage ☑ Nur Type of Water Supply: ☐ Community ☑ Pub	mber of Bedrooms 3 (604	enle)		
Type of Water Supply: Community Pub	olic 🗆 Well Distance fr	om well feet		
System Type: Type	TIL B	Types V and VI Systems expire in	5 years.	
(In accordance with Table V a)	Owner mus	t contact Health Department 6 months prior	or to expiration for permit renewal.	
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This system has been installed in compliance with applicable Nor	th Carolina General Statutes, Rules for	Sewage Treatment and Disposal, and all conditions of	the Improvement Permit and Construction Autho	rization.
63'×42' 3 B'		LOT LI	Furure repair repair area	
PERMIT CONDITIONS: Boy Ce CT	1 10/1	- Boyce C	$\Gamma \longrightarrow$	
 Performance: System shall perform in accordance. Monitoring: As required by Rule .1961. 	proance with Kule .1961.	/		
III. Maintenance: As required by Rule .1761.	Other:			
Subsurface system operator	required? Yes 🗆 No 🕱			
	r additional operation condition	ns, maintenance and reporting.		
IV. Operation:		A1 800		_
V Other	-			-
V. Other:	1 -			-
≥ D-Box	Pump 🔀	Alarm 🗆	H20Line 🗆	PWR Line
Following are the specifications for the sewage dispo				
		Septic Tank: 100		o gallons
Subsurface No. of Drainage Field ditches	exact length of each ditch 22	width of ditches 3	depth of ditches 18	inches
	Linear feet	leet ultches	feet ditches	inches
	11/1		A	
Authorized State Agent	I W KEH	Date	3-24-25	