Harnett County Department of Public Health

PERMIT # 5FD 2407-0031

Operation Permit

	DEODE BY LOCATION SEPTIC TANK	Nitrification Line Repair Expansion
Name: (owner) Jon Kern	PROPERTY LOCATION: /88 S.A. SUBDIVISION	LOT #
System Installer: Ron Wall	300011131011	
	edrooms / (Zpeople)	
Type of Water Supply: Community Public		
System Type: Type TI	Types V and VI Systems ex	xpire in 5 years.
(In accordance with Table V a)	Owner must contact Health Department 6 month	ths prior to expiration for permit renewal.
This system has been installed in compliance with analicable Moule Carelina	138 1 138	×
This system has been installed in compliance with applicable North Carolina	beneral statutes, kules for sewage Treatment and Disposal, and all condi	itions of the Improvement Permit and Construction Authorization.
	(system)	
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11.	130	
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ساله		
	1.45'	
		1 40
1 27	Horse Stalls	
231	Harse	
	Stalls	
PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance w	ith Rule .1961.	
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required?	nal operation conditions, maintenance and reporting.	
IV. Operation:	ar operation conditions, maintenance and reporting.	
V. Other:		
▶ D-Box □	Pump 🗆Alarm 🗆	H20Line PWR Line
Following are the specifications for the sewage disposal system	n on the above captioned property.	
Type of system: Conventional Other 25%	reduction Ia Septic Tank:	gallons Pump Tank: gallons
C L C H C	· ·	depth of
Drainage Field ditches of	f each ditch 138 feet ditches	3 feet ditches 28 inches
French Drain Required: Linear feet	A	
MI	(as)	Date 12.20 -24
Authorized State Agent	losh REHS	Date