## Harnett County Department of Public Health

PERMIT # SFD &	ACO - 104	<b>Operation</b>	Permit		
333003 31 1				ification Line 🗆 Repair 🛭	Fynancian
		PROPERTY LOCAT	ION: 340 DOUBL	6 ROSOEL	- Lypansion
Name: (owner)	3mm Dougles		DUNCAUS CRO		63
		30DDIVISION _	CONCAD CIZ	LUI #	2)
	YELLOW DOG	. 3			
Basement with plumbing	r:   Garage  Number of Bedroon  Community  Public  Wel		foot		
System Type:			V and VI Systems expire in 5 ye	pars	
(In accordance with Tab			Department 6 months prior to		
,	,		Dallo C 200 P Dis Tis Inc.	Provide Provide Control of	
This system has been installed	in compliance with applicable North Carolina General	Statutes, Rules for Sewage Treatment ar	nd Disposal, and all conditions of the Im	provement Permit and Construction Authoriz	zation.
		REPAIR ! ANKA ! HOUSE	-00		
		0008 LE			
-		2457CC			
PERMIT CONDITIONS:					
	System shall perform in accordance with Ru	e .1961.			
II. Monitoring:	As required by Rule .1961.				
	As required by Rule .1961. Other:				
	Subsurface system operator required? Yes				
IV. Operation:	If yes, see attached sheet for additional ope	ration conditions, maintenance	and reporting.		
ii. Operation.					
V. Other:					
	D-Box	np 🗆	Alarm $\square$	H20Line $\ \square$	PWR Line
	cations for the sewage disposal system on t				
Type of system:   Colored Colo				gallons Pump Tank:1000	gallons
	No. of exact le	ditch 270 feet	width of ditches3	depth of feet ditches 22	inches
French Drain Required:	linear feet	until leet	unclies	_ icet uitcles _ & &	iliciles
				1 2	
Authorized State Age	nt	DEHS	Date	11 15 23	