Harnett County Department of Public Health

PERMIT # SPD Z4		Operation Permit	
		Installation Septic Tank Nitrification	
Name: (owner)	IZB BROUD N.C. LLL	SUBDIVISION HODGES IT HELLS	10T # 20
System Installer: Basement with plumbin Type of Water Supply: System Type: Treeses (In accordance with Tal	g: Garage Number of Sedrooms 4 Grammunity Public Well Distance Well Dis	SUBDIVISION	
	SFR MBrinn HBrinn	Adams Porte	6
PERMIT CONDITIONS:		,	
I. Performance: II. Monitoring: III. Maintenance: IV. Operation:	System shall perform in accordance with Rule .1961. As required by Rule .1961. As required by Rule .1961. Other: Subsurface system operator required? Yes No If yes, see attached sheet for additional operation condition	ons, maintenance and reporting.	
V. Other:			
v. vuler.	D.Pov	Alares 🗆 Hoose	DIAD 1
Following are the specif Type of system: (C) Subsurface Drainage Field French Drain Required:	ications for the sewage disposal system on the above capt	Septic Tank: / 000 gallon width of	
Authorized State Ag	ent_ Por marks	thenly Date 6-3	5-23