Harnett County Department of Public Health

	, 1
PERMIT # SFD 2412-0087	Operation Permit
	New Installation Septic Tank Mitrification Line Repair Expansion
	PROPERTY LOCATION: 51 Robert House, Fugury
Name: (owner) KB Homes	SUBDIVISION Birch wood Grove LOT # 146
System Installer: David Branlley	SOUTH DIVINE DIVINE TO THE TOTAL STATE OF THE STATE OF TH
Basement with plumbing: Garage Number of Bedroom	3
Type of Water Supply: Community Public Well	Distance from well feet
System Type: 25% Kennelion Type III(6) I	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.
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This system has been installed in compliance with applicable North Carolina General	Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
Freed pump + Alarm	1828 / / 1
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PERMIT CONDITIONS:	Robert Howe
I. Performance: System shall perform in accordance with Rul	e .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 ope	
IV. Operation:	ation conditions, maintenance and reporting.
V. Other:	
□ D-Box □ Pum	p 🗆Alarm 🗆 H20Line 🗆 PWR Line
Following are the specifications for the sewage disposal system on the	
Type of system: Conventional Other Type TLI	
Subsurface No. of exact let	orth , width of , depth of
Drainage Field ditches of each	
French Drain Required: Linear feet	
Authorized State Agent 12 1645	Date 5-7-25
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