Harnett County Department of Public Health

PERMIT # SF7	2502-0007	Operation I  New Installation	Permit Septic Tank	Nitrification Line	Repair   Expansion
		PROPERTY LOCATI	ON: 203 Gre	at Smokey	PL, Lillington
	DRB Group North C	acoline UC SUBDIVISION _	BILKE for	1	LOT # 128
System Installer: _ Basement with plumb	oing:  Garage Mumber of Bedi	00ms <u>4</u>			
Type of Water Supply System Type: 25%	Reduction Type III(1)	Well Distance from well  Te 4 Chabe ( Types	feet	n 5 voors	
(In accordance with T	Table V a)	Owner must contact Health	Department 6 months pri	ior to expiration for permit r	renewal.
This system has been insta	alled in compliance with applicable North Carolina Gen	aral Statutes Rules for Saware Treatment an	Disposal and all conditions of	the Improvement Permit and Country	
	10,44 10,44 18,01 18,01 18,01	Pt) - Acce-	112' W	Greet Smakey Place	
PERMIT CONDITIONS:					
I. Performance:	System shall perform in accordance with	Rule .1961.			
II. Monitoring: III. Maintenance:	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	operation conditions, maintenance a	nd reporting.		
V. Other:					
	D-Box	Pump 🗆 #	larm 🗆	H20Line □	PWR Lin
Following are the spe	cifications for the sewage disposal system of			1120Lille	IWK LIII
Type of system:	Conventional Type	III (g) Ja4 changes	. ,	gallons Pump Tank	
Subsurface Drainage Field	No. of exact ditches l exact	t length ach ditch 346' feet	width of ditches 3	depth of feet ditches 2	24-27" inches
French Drain Required	d:Linear feet		m(1777777)		
Authorized State A	Agent Man II	CEHS	Date	6-26-	25