## Harnett County Department of Public Health

**Operation Permit** PERMIT # SFD2502 00 YH Mew Installation Septic Tank Mitrification Line Repair Expansion PROPERTY LOCATION: 204 HOUSE TRUT LN DREAM TINDERS HOMES RIDGE SUBDIVISION WATSON LOT # 4 Name: (owner) GARRED System Installer: Garage Number of Bedrooms Basement with plumbing: Type of Water Supply: 

Community Public 

Well Distance from well System Type: 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. 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. RESAIR AREA HOUSE LIORSETROT LN PERMIT CONDITIONS: System shall perform in accordance with Rule . 1961. Performance: As required by Rule .1961. 11. Monitoring: III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes 
No X If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: Other: **PWR Line** D-Box Following are the specifications for the sewage disposal system on the above captioned property. DO Other (HAMBER Q4" Septic Tank: 1000 gallons Pump Tank: gallons Type of system: 

Conventional width of depth of Subsurface No. of exact length ditches \_20 of each ditch 300\_\_\_\_ feet inches ditches Drainage Field ditches French Drain Required: Linear feet REHS Authorized State Agent