Harnett County Department of Public Health

PERMIT # SFD 2503 - 0045	Operation Permit	
	New Installation Septic Tank Nitrification Line Repair	☐ Expansion
Name: (owner) SDH Ralaigh	PROPERTY LOCATION: 229 Deodore In SUBDIVISION Cedar points LOT #	
	SUBDIVISION <u>Cedar points</u> LOT #	31
System Installer: Basement with plumbing: Garage Number of Bedrooms	3 (6people)	
Type of Water Supply: Community Public Well	Distance from well feet	
System Type: Type III (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 St	tatutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authoriz	zation.
8	10 To Home 29'	
	Deodora La	
 I. Performance: System shall perform in accordance with Rule II. Monitoring: As required by Rule .1961. 	1.1701.	
III. Maintenance: As required by Rule .1961. Other:	No.	-
If yes, see attached sheet for additional oper	ration conditions, maintenance and reporting.	
IV. Operation:		-
V. Other:		-
D-Box	np 🗆 Alarm 🗆 H20Line 🖂	PWR Line
Following are the specifications for the sewage disposal system on the Type of system: Conventional Other 25%	ne above captioned property. LOV TON DAY Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface No. of a exact len	ngth 10 width of a depth of	
Drainage Field ditches of each	ditch 60 feet ditches 39 feet ditches 39	inches
	Man	
Authorized State Agent	Malurett Date 4-30-25	