## Harnett County Department of Public Health

PERMIT # SFD 2503-0188 Operation Permit Mew Installation Septic Tank Mitrification Line Repair Expansion PROPERTY LOCATION: 31 prining way Augist
SUBDIVISION Tobacco Road LOT # SUBDIVISION Tobacco Name: (owner) Peridson Hame-System Installer: Genes Basement with plumbing: Garage Mumber of Bedrooms Type of Water Supply: 

Community Public Well Distance from well feet System Type: 25% Reduction Type IH(b) EZ-Flow 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. \* Needs from + Alacon for Final SED UBA PERMIT CONDITIONS: System shall perform in accordance with Rule . 1961. Performance: II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes 
No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: Other: Pump D-Box Alarm □ H20Line **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. 1 Other Type III(6) Septic Tank: 1,000 Type of system: 

Conventional gallons Pump Tank: 1,000 Subsurface No. of exact length width of Drainage Field ditches of each ditch feet French Drain Required: Linear feet Date 8-5-25 REHS Authorized State Agent