Harnett County Department of Public Health

PERMIT # 1502504-0027

Operation Permit

	🔽 New Installation 🗗 Septic Tank 🗷 Nitrification Line 🗆	Repair Expansion
Name: (owner) BC wellors keell	PROPERTY LOCATION: 473 gld fashioned as	July 4 19
System Installer: Genes Brekhoe	SUBDIVISION Wellos knell	LOT # <i>69</i>
Basement with plumbing: Garage Number of Bedrooms	4 (Speople)	
Type of Water Supply: Community Public Well	Distance from well feet	
System Type: Type TIT B (In accordance with Table V a)	Types V and VI Systems expile in 5 years.	
(III accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for permit	renewai.
This system has been installed in compliance with applicable North Carolina General State	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Cons	truction Authorization.
232,	50° 50° 50° 50° 50° 50°	
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule		
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 opera		
IV. Operation:		
V. Other:		
MANIFILD D-Box Pump	∞ Alarm □ H20Line □ _	PWR Line
Following are the specifications for the sewage disposal system on the	above captioned property.	
Type of system: Conventional Other 252146 Subsurface No. of exact leng		
Drainage Field ditches 7 of each di		18 inches
French Drain Required: Linear feet		
Authorized State Agent Mal	QEHS Date 9-17-25	