

Harnett County Department of Public Health

PERMIT # SFD 2505-0072

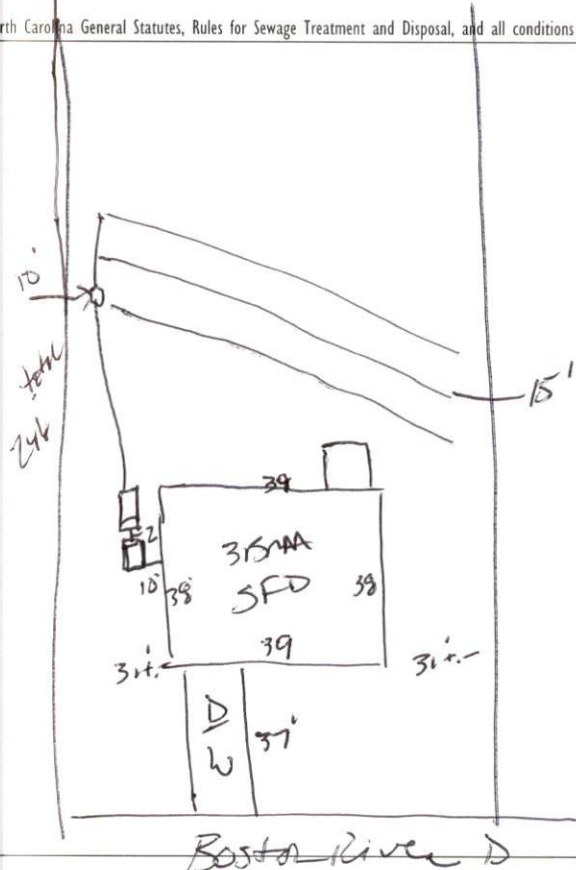
Operation Permit

☒ New Installation
 ☒ Septic Tank
 ☒ Nitrification Line
 ☐ Repair
 ☐ Expansion
PROPERTY LOCATION: SL 1725 Ashe AveName: (owner) TSJ BuildingsSUBDIVISION ILAS WayLOT # 11System Installer: BrentleyBasement with plumbing: ☐ Garage ☒ Number of Bedrooms 3Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well _____ feetSystem Type: 2590 Reduction System 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.



PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with Rule .1961.

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: _____

V. Other: _____

☐ _____ D-Box
 ☐ _____ Pump
 ☐ _____ Alarm
 ☐ _____ H2O Line
 ☐ _____ PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: ☐ Conventional ☒ Other 2590 Reduction Septic Tank: 1000 gallons Pump Tank: 1000 gallonsSubsurface No. of 3 exact length width of depth of
Drainage Field ditches 3 of each ditch 100 feet ditches 3 feet ditches 24 inches

French Drain Required: _____ Linear feet

Authorized State Agent

James E. Manhart JRDate 9-19-25