

Harnett County Department of Public Health

PERMIT # SFD2506-0097

Operation Permit

659 Beacon Hill

☒ New Installation ☒ Septic Tank ☐ Nitrification Line ☐ Repair ☐ Expansion

PROPERTY LOCATION: SL 1229 Meadows Rd

Name: (owner) NEW HOME INC

SUBDIVISION DUNN CREEK

LOT # 37

System Installer: DENNIS MED (D)

Basement with plumbing: ☐ Garage ☒ Number of Bedrooms 4

Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well _____ feet

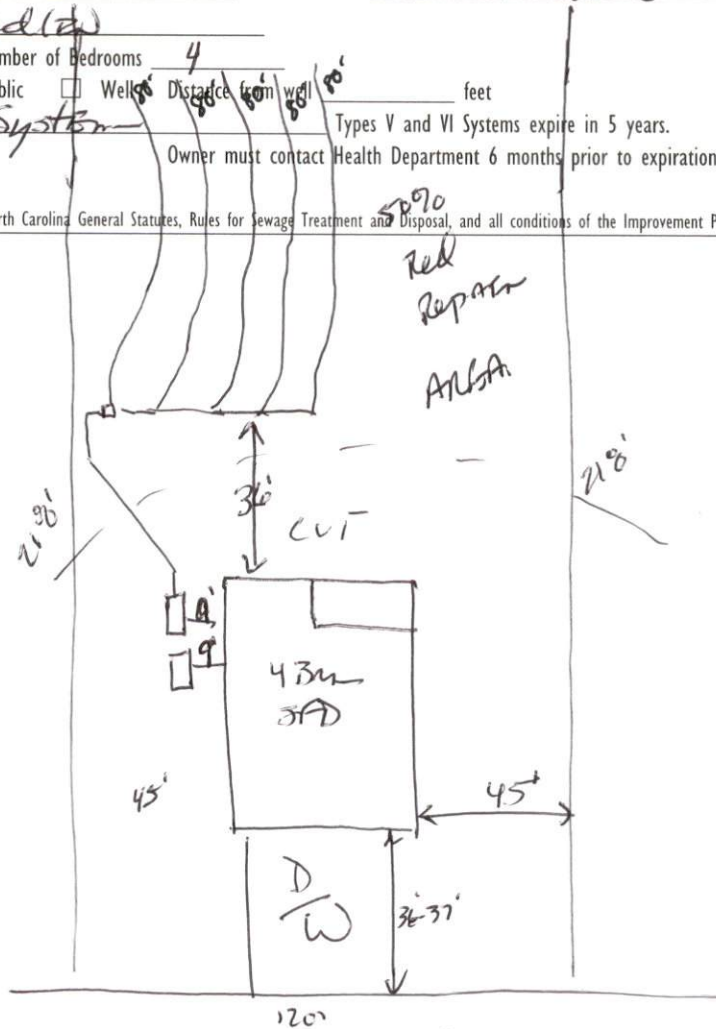
System Type: 25% REDUCED SYSTEM

(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 LSS Redesign
on line length



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 25% REDUCED SYSTEM EZFlow Septic Tank: 1000 gallons Pump Tank: 1000 gallons

Subsurface Drainage Field No. of ditches 5 exact length of each ditch 80 feet width of ditches 3 feet depth of ditches 20 inches

French Drain Required: _____ Linear feet

Authorized State Agent _____

Mah RCHS

Date 10-17-25