HTE# 08-5-20145 Hi tt County Department of Publi ealth 20425
PERMIT # 24811 Operation Permit
□ New Installation □ Septic Tank □ Repair □ Nitrification Line ☑ Expansion
PROPERTY LOCATION: 5x 1417 Christian Cacherris
Name: (owner) Rowald + Kemberly Hicks SUBDIVISION MEIS MEADON LOT # 45
System Installer: Registration # Registration #
Type of Water Supply: Community Public Well Distance from well feet
System Type: Existing Carnel System Reconnect 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.
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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 No If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:
V. Other:
Following are the specifications for the sewage disposal system on the above captioned property.
Type of system: Conventional Other Septic Tank: 1000 gallons Pump Tank: gallons Subsurface No. of exact length width of depth of
Drainage Field ditches $\cancel{E}\cancel{\times}$ of each ditch $\cancel{E}\cancel{\times}$ feet ditches $\cancel{E}\cancel{\times}$ feet ditches $\cancel{E}\cancel{\times}$ inches
French Drain Required: Linear feet

Authorized State Agent

12-31-08

Date