HTE # 05-50013001

## ARNETT COUNTY HEALTH DI RTMENT ENVIRONMENTAL HEALTH SECTION

18007

## **OPERATIONS PERMIT**

| 01-  |   |                         |
|--|---|-------------------------|
| Name: (owner) ANTONIO SANTIA                   | New Installation X Septic                         | Tank  Repair            |
|  | Nitrification Line   Exp                          |                         |
| Contractor: REGGIE CARGER                      | Registration #                                    |                         |
| Basement with Plumbing:   G                    |   |                         |
| Water Supply: Well Public Distance From Well:f | *   |                         |
| Following are the specifications for the       | he sewage disposal system on above captioned p    | roperty.                |
| Type of system:   Conventional                 | Other Ties Chies                                  |                         |
| Size of tank: Septic Tank: 1000                | _ gallons Pump Tank: gallons                      |                         |
| Drainage Field ditches 4                       | of each ditch <u>100</u> ft. ditches <u>3</u> ft. | depth of ditches QH in. |
| French Drain Required: L                       | inear feet Date: 12/13/05                         |                         |
| PERMIT NO. 22211                               | Inspected by:                                     | M Rs                    |
|  | 250   | DRAMING<br>NT3          |
|  | 28'X D' 4 BEDROOM HOME  ORIVE  IND  ORIVE         |                         |