HTE# 07-5-16478

Harnest County Department of Public ealth 19246

	2.70	and soparation of the same to	
PERMIT # <u>2403</u>	<i>10</i>	Operation Permit	
		Mew Installation Septic Tank Repair Mitrificat	tion Line Expansion
	-	PROPERTY LOCATION: SK 1542 OID Bures Creek	e RD
Name: (owner) _6	Ary/tv6/th5	SUBDIVISION GARY HIX AKS	LOT # _2
System Installer:	DUNI! JOHNSON	SUBDIVISION <u>CARRY HIXO AKS</u> Registration #	
Basement with plumbing	g: Garage Mumber of Bedrooms		
Type of Water Supply:		Distance from well feet	
	REDUCTION SUFTE	Types V and VI Systems expire in 5 years.	
(In accordance with Tab	le V a)	Owner must contact Health Department 6 months prior to expiration for permi	it renewal.
This custom has been installed	d in compliance with applicable Month Corolina Consest St.	States Bules for Courses Teachers and Diseased and all conditions of the Incomment Description of	
inis system nas been installed	in compilance with applicable North Carolina General sta	atutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Co	onstruction Authorization.
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		5R1542 OID Bures creek RIS.	
		SICHTE ON IGNOR CHEECES.	
PERMIT CONDITIONS:			
	System shall perform in accordance with Rule	.1961.	
-	As required by Rule .1961.		
	As required by Rule .1961. Other:		
	Subsurface system operator required? Yes		
	If yes, see attached sheet for additional opera	ation conditions, maintenance and reporting.	
IV. Operation:			
V. Other:			
Following are the specifi	fications for the sewage disposal system on the	shows continued preparty	
Type of system:			ank: gallons
	No. of exact leng		
French Drain Required:		The state of the s	mates
		6 -	
Authorized State Age	ent remar 2 Mark	Date 5-11-07	