

HTE# 04-5-10206/R

Harratt County Department of Public Health 19620

PERMIT # 21263

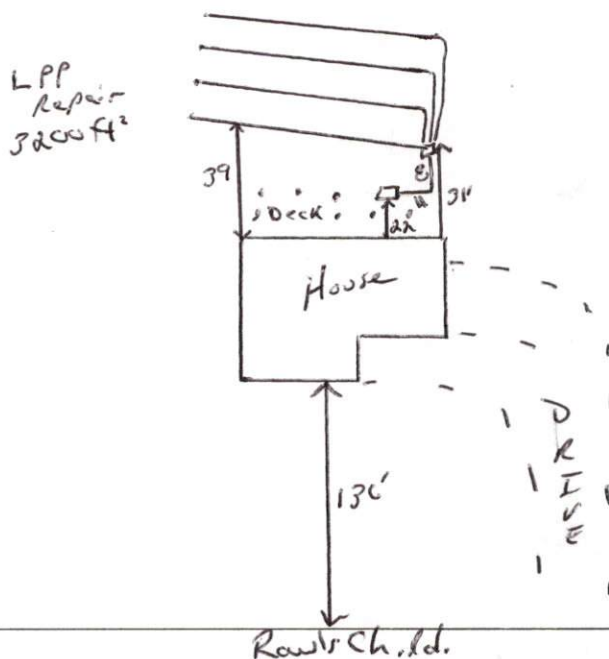
Operation Permit

☒ New Installation ☒ Septic Tank ☐ Repair ☒ Nitrification Line ☐ ExpansionPROPERTY LOCATION: SR 1415Name: (owner) James Minor SUBDIVISION _____ LOT # ASystem Installer: Dennis Medina Registration # _____Basement with plumbing: ☐ Garage ☒ Number of Bedrooms 4Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well _____ feetSystem Type: II A 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: _____

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

Type of system: ☒ Conventional ☐ Other _____ Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallonsSubsurface No. of 4 exact length 80 width of 3 depth of 18-20
Drainage Field ditches _____ of each ditch _____ feet ditches _____ inches

French Drain Required: _____ Linear feet

Authorized State Agent

Bryan McSwain P.E.

Date

3/24/2008