HTE# 06-5-14716R

## H ett County Department of Pub... Health 18781

PERMIT # 22971

Operation Permit

✓ New Installation ☒ Septic Tank ☐ Repair ☒ Nitrification Line ☐ Expans	ion
PROPERTY LOCATION: SHERIFF JOHNSON RO SR 1516	
Name: (owner) GARY OLIVE SUBDIVISION LOT # 7	
System Installer: KENNETH WEEKES Registration #	
Basement with plumbing:  Garage Number of Bedrooms 2	
Type of Water Supply:   Community   Public   Well Distance from well   feet	
System Type: 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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REPAIR	
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SR 1516	
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:	
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.	
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Subsurface No. of exact length width of depth of	
Drainage Field ditches 3 of each ditch 50 feet ditches 3 feet ditches 24 inches	
French Drain Required:Linear_feet	
lather III	
Authorized State Agent Date +0/5/06	