HTE# 06-5-15039R

## Harnest County Department of Public nealth 19063

men co o pooppe	county Department of Fubile meanting 170	00
PERMIT # 23534	Operation Permit	
	New Installation Septic Tank Repair Nitrification	line   Expansion
	PROPERTY LOCATION: Leavel Blackhood	Teme Capansion
Name: (owner) H+H Construct: un	SUBDIVISION WOODSLive	LOT # 102
System Installer: Ott. 5 Strickland	Registration #	_LOT #
Basement with plumbing: Garage Number of Bedro		
	Well Distance from well feet	
System Type: III G	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 re	enewal.
This system has been installed in compliance with applicable Morth Carolina Con-	eral Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Const	and a but ainte
ins system has been instance in compnance with applicable north caronna bene	eral statutes, nues for sewage freatment and disposal, and an conditions of the improvement remit and consti-	ruction Authorization.
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Acc	epted System / 10	
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	20' 5	
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P- 2	1 40	
E. C.		
PERMIT CONDITIONS:	Koad	
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 □	
	operation conditions, maintenance and reporting.	
IV. Operation:		
V Oshan		
V. Other:		
Following are the specifications for the sewage disposal system of	n the above captioned property.	
Type of system:   Conventional Other 6261	Size of tank: Septic Tank: 1000 gallons Pump Tank	: gallons
Subsurface No. of exact	t length width of depth of	10
	ach ditch $270$ feet ditches $3$ feet ditches $2$	18 inches
French Drain Required: Linear feet		
Interior Company ( M. 4)	es abulan	