

HTE# 06-5-15055

Har t County Department of Public Health 19840

PERMIT # 14343

Operation Permit

- New Installation
- Septic Tank
- Repair
- Nitrification Line
- Expansion

PROPERTY LOCATION: SR1827 SKEET RANGE RD

Name: (owner) Christopher + DONNA Be II SUBDIVISION Joseph D Roberts LOT # 1

System Installer: Kenneth Weeks Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

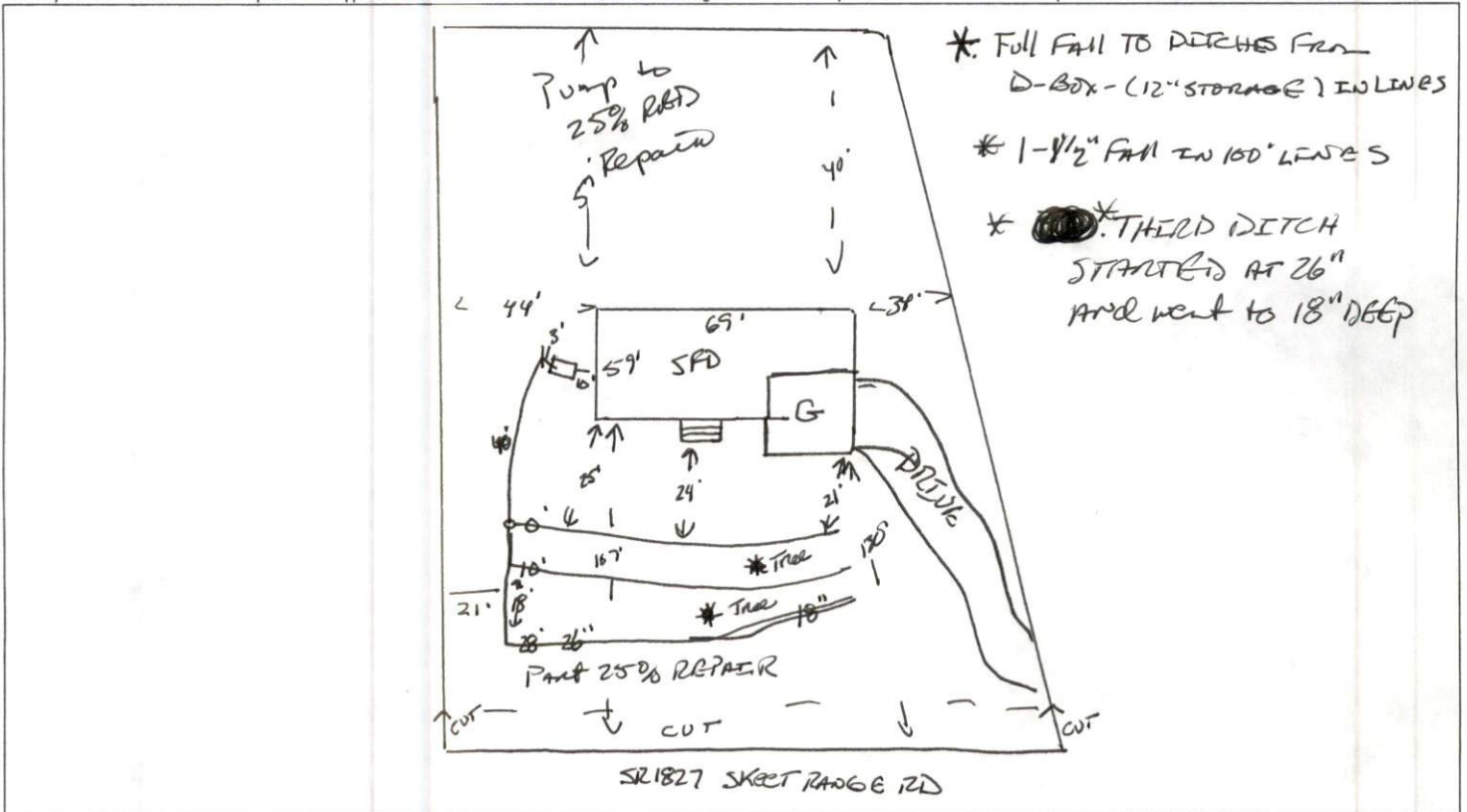
Type of Water Supply: Community Public Well Distance from well _____ feet

System Type: Conventional 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.



- * Full Fall TO DITCHES FROM D-BOX - (12" STORAGE) IN LINES
- * 1-1/2" FALL IN 100' LINES
- * ~~1~~ THIRD DITCH STARTED AT 26" AND WENT TO 18" DEEP

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: _____ gallons

Subsurface No. of _____ exact length _____ width of _____ depth of _____

Drainage Field ditches 3 of each ditch 100 feet ditches 3 feet ditches 26 inches

French Drain Required: _____ Linear feet

Authorized State Agent James E. Mawhant Date 1-15-08