PERMIT (NONDTIONS:   Performance:	HTE# 06.500 15	Har t County Department of Public alth 19435
Name: (owner)  Name:	PERMIT # 23 45	Operation Permit
System first plumbing Garage Number of Bedrooms Type of Water Supply: Gamminy System Type: Year Supply: Gamminy System Supply: Gamminy Syste	, (H	New Installation Septic Tank Repair Nitrification Line Expansi
Basement with plumbing: Garage Type of Water Supply: Community Public Well Distance from well Types V and VI Systems sepire in 5 years.    Public Community Public Well Distance from well Types V and VI Systems sepire in 5 years.   Name of Sederooms	Name: (owner)	SUBDIVISION WOSE DIFFERENCE LOT #150
System Type: E1 (In accordance with Table V a)  Owner must contact Health Department 6 months prior to expiration for permit renewal.  John V DNA  This pystem has bees installed in compliance with applicable North Carolina General Statutes, Rules for Sevage Treatment and Dioposal, and all conditions of the Improvement Permit and Construction Authorization.  ATM TO LP MYMAN  EF Set O Delessory of the Second Poncel Control Cont	,	☐ Garage ☐ Number of Bedrooms
Owner must contact Health Department 6 months prior to expiration for permit renewal.    Permit Conditions   Permit conditions	0	
PERMIT CONDITIONS:  1. Performance:  1. Monitoring:  1. Maintenance:  2. System shall perform in accordance with Rule 1961.  A required by Rule 1961. Other:  Subsurface system operator required? Yes  Subsurface system operator required? Yes  No Operation:  N. Operation:		
PERMIT CONDITIONS:  1. Performance:  11. Monitoring:  11. Maintenance:  11. Maintenance:  12. System shall perform in accordance with Rule .1961.  As required by Rule .1961. Other:  Subsurface system operator required? Yes:  15. Subsurface system operator required? Yes:  16. Subsurface system operator required? Yes:  17. Subsurface system operator required? Yes:  18. Subsurface system operator required? Yes:  19. Subsurface system operator requ	(san cond)	
PERMIT CONDITIONS:  1. Performance:  11. Monitoring:  11. Maintenance:  12. As required by Rule 1961.  As required? Yes \( \sim \) No \( \sim \)  If yes, see attached sheet for additional operation conditions, maintenance and reporting.	This system has been installed in	1
PERMIT CONDITIONS:  1. Performance:  11. Monitoring:  11. Maintenance:  12. As required by Rule .1961.	\	474 75 LIV Mys. R
PERMIT CONDITIONS:  I. Performance: II. Monitoring: III. Maintenance: As required by Rule .1961. As required by Rule .1961. As required by Rule .1961. If yes, see attached sheet for additional operation conditions, maintenance and reporting.  IV. Operation:		If Set Dades off of
PERMIT CONDITIONS:  I. Performance: System shall perform in accordance with Rule .1961.  II. Monitoring: As required by Rule .1961.  As required by Rule .1961. Other:  Subsurface system operator required? Yes   If yes, see attached sheet for additional operation conditions, maintenance and reporting.		STORM Pond cannot Be met.
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	If	
V. Other:	IV. Operation: _	
	V. Other:	
Following are the specifications for the sewage disposal system on the above captioned property.	Following are the specific	cations for the sewage disposal system on the above captioned property
Type of system: Conventional Other C-2 Flow Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons	Type of system:   Con	onventional Other C-2 Flow Size of tank: Septic Tank: 1000 gallons Pump Tank: gall
Subsurface No. of exact length width of depth of Drainage Field ditches feet ditches feet ditches feet ditches		
French Drain Required: Linear feet		diction of case of the state of
Authorized State Agent O6.05.07	Authorized State Agen	nt