HTE# 06-5-15746 Harriett County Department of Public Health 18904	
PERMIT # Z330/ Operation Permit	
New Installation Septic Tank Repair Nitrification Line	Expansion
	Expansion
Name: (owner) ATKENS PIACE LLC SUBDIVISION DEPOTEMENTS LOT #	23
System Installer: mike ray Registration #	
Basement with plumbing: Garage Number of Bedrooms 3	
Type of Water Supply:   Community Public Well Distance from well feet	
System Type: 25% LBD System Type TV 6. 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 Authorizat	ion.
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PERMIT CONDITIONS:	
1. 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  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 25% OF Conventional Size of tank: Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface No. of exact length width of depth of	
Drainage Field ditches 2 of each ditch 120 feet ditches 3 feet ditches 24°	_ inches
French Drain Required: Linear feet	

Authorized State Agent Janes 2 Manhant ans

Date 12-18-06