HTE# 06.500 160278 Harnest County Department of Public lalth 19382 PERMIT # 23 802 Operation Permit New Installation Septic Tank Repair Nitrification Line Expansion PROPERTY LOCATION: 1 \ \ \ SUBDIVISION Colonial Hills Name: (owner) System Installer: Registration # Garage M Number of Bedrooms Basement with plumbing: Type of Water Supply:
Community Public, Distance from well ☐ Well Types V and VI Systems expire in 5 years. System Type: / / / /> (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. 110 Mana. Dave US. 12 PERMIT CONDITIONS: System shall perform in accordance with Rule .1961. I. Performance: II. As required by Rule .1961. Monitoring: III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes \(\square\) No \(\square\) If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: Other: Following are the specifications for the sewage disposal system on the above captioned property.

Type of system:

Conventional Other Oracle Size of tank: Septic Tank: gallons Pump Tank: Subsurface No. of width of depth of exact length of each ditch Drainage Field ditches ditches ditches French Drain Required: Linear feet Authorized State Agent