HTE#_06-5- /	Ha tt County Department of Public alth 19029	
PERMIT # 23 45	Operation Permit	
	New Installation Septic Tank Repair Nitrification Line E	pansion
	PROPERTY LOCATION: 1403	
Name: (owner)	Travist Nicole Dawson SUBDIVISION Padfortners LOT#	
System Installer:	Bobby Lockery Registration #	
Basement with plumbin	ng: Garage Wumber of Bedrooms	
Type of Water Supply:		
1	THE A Types V and VI Systems expire in 5 years.	
(In accordance with Ta	able V a) Owner must contact Health Department 6 months prior to expiration for permit renewal.	
This system has been install	led in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization	
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	i House	
	2 2 1	
	22 30	
	2	
	10 1 F	
	E	
	21 Accepted System A	
	90'	
	521403	
PERMIT CONDITIONS:		
I. Performance:	System shall perform in accordance with Rule .1961.	
II. Monitoring: III. Maintenance:	As required by Rule .1961. Other:	
III. Haintenance.	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 con-	effications for the sewage disposal system on the above captioned property.	
Type of system:		gallons
Subsurface	No of exact length width of depth of	_ 0
Drainage Field		inches
French Drain Required	d: Linear feet	

Authorized State Agent

Date 3/7/2007