Hal t County Department of Public valth

HIL# 06-3-/6360 Hal COI	inty Department of Fublic health 19245
PERMIT # 24026	Operation Permit
	✓ New Installation ✓ Septic Tank □ Repair ✓ Nitrification Line □ Expansion
	PROPERTY LOCATION: 52/429 Chalpanto RD
Name: (owner) Cuzarn Buildans INC	SUBDIVISION DEXTENSION LOT # 3/
System Installer: ED CURREN Buelden	Registration #
Basement with plumbing: Garage Mumber of Bedrooms	3
Type of Water Supply: ☐ Community ☐ Public ☐ Well	Distance from well feet
System Type: 25% REDUCTION System— (In accordance with Table V a)	Owner must contact Health Department 6 months prior to expiration for permit renewal.
(III accordance with Table Y a)	owner must contact nearth bepartment o 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.	
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	BRENDAMOORE
PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule	041
II. Monitoring: As required by Rule .1961.	701.
III. Maintenance: As required by Rule .1961. Other:	
Subsurface system operator required? Yes 🗆 No	
If yes, see attached sheet for additional operation:	on conditions, maintenance and reporting.
ii. Operation.	
Y. Other:	
Following are the specifications for the sewage disposal system on the a Type of system: Conventional Other 25% 10+0 vcrio	
Subsurface No. of exact length	
,	th 120 feet ditches 30 > 18 inches
French Drain Required: Linear feet	
5 MI Lans	
Authorized State Agent pmes & Marhantons Date 5-11-07	