HTE# <u>07-5-166441</u> 2	Ha tt Cou	inty Departmen	it of Publi	ealth	20022
PERMIT # _ Z3737		Operation P	<u>ermit</u>	/	
	Ţ	New Installation	Septic Tank 🗆	Repair 🗆 Nitrific	ation Line 🗆 Expansion
		PROPERTY LOCATIO	N:521440 JA	mes Norris	>
Name: (owner) Iom Develo	pons	SUBDIVISION _	Atoma Poa	+	LOT # _//
System Installer: STANCEL BUI	IDERS	Registration	#		
Basement with plumbing: Garage	Number of Bedrooms _	3			
Type of Water Supply: Community	Public 🗆 Well	Distance from well	feet		
System Type: 25% REDUCTION			and VI Systems expire i	n 5 years.	
(In accordance with Table V a)		Owner must contact Health D	Department 6 months pr	ior to expiration for peri	nit renewal.
This system has been installed in compliance with applic	able North Carolina General Statut	es, Rules for Sewage Treatment and	Disposal, and all conditions of	f the Improvement Permit and	Construction Authorization.
			*	(12")	
			FULLSTORAGE	28 ON ALL DI	PATHLENES
			*Sustiga In	STALLED AS	CATALENES ChyED OUT
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1,			Dy KITE	· (4)	
/	-]	* ICHOODE	W/L ENSPECT	a)
150	1612ED Repourt		TATTE	N ENFRENT	-
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\ _		9-10-1	V >>>		
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4 —	Js.]9/			
1	Fred T	21'			

	Topson.	
PERMIT CONDITIONS:		
 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 \(\subseteq \text{No } \subseteq \)	
IV. Operation:	If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
iv. Operation.		
V. Other:		
	ifications for the sewage disposal system on the above captioned property.	
Type of system:		gallons
Subsurface Drainage Field	No. of exact length width of depth of ditches 3 of each ditch $8D$ feet ditches $3D \rightarrow 18$	inches
French Drain Required:		_ inches
The state of the s		
Authorized State A	gent James & MANHAN + CVS. Date 3-20-08	