HTE# 07-5-16806

Authorized State Agent

PERMIT # 23464

Harmet County Department of Public lalth 19587 Operation Permit New Installation Septic Tank Repair Nitrification Line Expansion PROPERTY LOCATION: 52 1429 SUBDIVISION Dexter Field LOT # 25 Name: (owner) System Installer: Registration # Basement with plumbing: Garage Number of Bedrooms Type of Water Supply:

Community ☐ Public ☐ Well Distance from well TILG 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. 40 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 □ No □ 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 1 Other EZF/ow Size of tank: Septic Tank: gallons gallons Pump Tank: Subsurface exact length width of of each ditch 120 Drainage Field ditches inches French Drain Required: Linear feet