HTE# 07-5-16823

Har t County Department of Public alth 19265

Operation Permit PERMIT # 2372/ ✓ New Installation ✓ Septic Tank ☐ Repair ✓ Nitrification Line ☐ Expansion PROPERTY LOCATION: SC 1565 Solns Hoyes M) Name: (owner) DARRY FVANS IN SUBDIVISION Ituntens Porci LOT # System Installer: AVILA CONSTALL Registration # Basement with plumbing: Garage Number of Bedrooms Type of Water Supply:

Community Public ☐ Well Distance from well System Type: 15% Albabouron System Type TIL G F. 2 LAY Types V and VI Systems expire in 5 years. (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 Morth Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. DIWA 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
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. Other 15% NEDUCTION Size of tank: Septic Tank: 1000 Type of system:

Conventional gallons Pump Tank: Subsurface No. of exact length width of depth of 60 Drainage Field ditches of each ditch ditches 78-718 inches ditches French Drain Required: Linear feet Authorized State Agent Date