Ha tt County Department of Public nealth 19345

Name: (owner) Standard Repair Nitrification Line Expansion PROPERTY LOCATION: Close Hall	PERMIT # 2389	Operation Permit
Name: (owner) STACL SUNDIFICION SUBDIFICION Subdif		
Name (owner) Secretables (
System Installer: Number of Bodrooms 3 Type of Water Supply: Community	Name: (owner) 5	TANGLE BUILDERS SUBDIVISION ROSSMONDE BRAGE 10T# 17
Bazement with plumbing Garage Number of Bedrooms Type of Water Supply: Gommunity No Public Well Distance from well 100 feet Types Y and W Systems expire in 5 years. Types Y and W Systems expire in 5 years. This younn has been intable in compliance with applicable Rorth Carolina General Statutes, hales for lowage Traument and Disposal, and all conditions of the Improvement Fermit and Construction Authorization. PERMIT CONDITIONS: I. Performance: System shall perform in accordance with Rule . 1961. III. Monitoring: As required by Nule . 1961. III. Maintenance: As required by Nule . 1961. If yes, see attached sheet for additional operations conditions, maintenance and reporting. If yes, see attached sheet for additional operation of each dirch 80 feet ditches 3 feet ditches 44 inches french Drain Required: No Other: Following are the specifications for the sewage disposal system on the above captioned property. Jan 100 feet Status System Status General Status St	System Installer:	
PERMIT CONDITIONS: Permit Control Convert System Specifications for the sewage disposal system on the above captioned property.		0
System Type:		
Owner must contact Health Department 6 months prior to expiration for permit renewal. This system has been installed in compliance with applicable North Cardina General Statutes, Nates for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. PERMIT CONDITIONS: 1. Performance: 1. Performance: 1. Performance: 1. Performance: 1. Maintenance: 2. System thall perform in accordance with Rule 1/961. 1. Maintenance: 3. Subsurface system operator required? Yes 1. No. Operation: 1. Operation: 1. Operation: 1. Other: 2. Other: 2. Other: 3. Teet ditches 2. Teet ditches 3. Teet ditches 3. Teet ditches 4. Teet ditches 4	System Type:	
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PERMIT CONDITIONS: 1. Performance: 1. Performance: 1. Monitoring: 1. Maintenance: 2. System shall perform in accordance with Rule .1961. 1. Monitoring: 1. As required by Rule .1961. Other: 2. Subsurface system operator required? Yes \(\) No \(\) If yes, see attached sheet for additional operation conditions, maintenance and reporting. 1. Operation: 1. Other: 1. Conventional \(\) Other: 1. Conventional \(\) Other Size of tank: Septic Tank: \(\) 1000 \(\) gallons Pump Tank: \(\) gallons Pump Tank: \(\) gallons Pump Tank: \(\) Gept of system: \(\) No. of \(\) of exact length of feet ditches \(\) inches	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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Monitoring: As required by Rule . 1961. Other:	PERMIT CONDITIONS:	(- OLO -141)
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. No. Other: Size of tank: Septic Tank: 1000 gallons Pump Tank: gallons Subsurface No. of exact length width of depth of Drainage Field ditches 3 of each ditch 80 feet ditches 5 feet ditches 44 inches French Drain Required: Linear feet		
Subsurface system operator required? Yes		
If yes, see attached sheet for additional operation conditions, maintenance and reporting. V. Other:		
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French Drain Required: Linear feet		No. of exact length width of depth of
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	Authorized State Ager	nt