HTE# 07-5-17470

Har....t County Department of Public ...alth 19738

| PERMIT # 23953 | Operation Permit ✓ New Installation ✓ Septic Tank □ Repair ✓ Nitrification | line 🗆 Expansion |
|---|--|------------------------|
| | PROPERTY LOCATION: Sec 1934 Johnson 125 | Line Lapansion |
| Name: (owner) Myott Building + Developmen | L SUBDIVISION JOHNSON FORMS | LOT # <u>49</u> |
| System Installer: Trow Mathews | Registration # | |
| Basement with plumbing: Garage Number of Bedgooms | | |
| Type of Water Supply: Community Public Well | | |
| System Type: 25% REDUCTION System Type IF | | |
| (In accordance with Table V a) | Owner must contact Health Department 6 months prior to expiration for permit re | newal. |
| This system has been installed in compliance with applicable Morth Carolina General St | statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Constr | auction Authorization. |
| This specifi was seen mistance in companies and approach to in the companies | natures, notes for seringe reactions and suspense, and an estimation of the improvement. | activit regionates. |
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| | 25% Repair | |
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| | W. A. K. | |
| | BRUCK JOHNSON ZD | |
| PERMIT CONDITIONS: | | |
| I. Performance: System shall perform in accordance with Rule | e .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 oper | | |
| IV. Operation: | | |
| 0.000 | | |
| V. Other: | | |
| | 7 - 2 - 1 5 | |
| Following are the specifications for the sewage disposal system on the Type of system: Conventional Other 25% (CD) CD | ne above captioned property. 1700 Systo Size of tank: Septic Tank: <u>1000</u> gallons Pump Tank: | gallons |
| Subsurface No. of exact len | | gallulis |
| | ditch 80 feet ditches 3 feet ditches | 28-718 inches |
| French Drain Required: Linear feet | | |
| | . / - | |
| Authorized State Agent James & Mas | Date 10-3-07 | |
| 0 / | | |