HTE# 07-50	2 17995R Hai t County Department of Public lalth 19568
PERMIT # 246	Operation Permit
	New Installation Septic Tank Repair Nitrification Line Expansion
Name: (owner)	PROPERTY LOCATION: 1115  SUBDIVISION CRITTURE LOT # 258  Registration #
System Installer:	Tecl Brown Registration #
Basement with plumbin	g: Garage 🖾 Number of Bedrooms
Type of Water Supply: Community & Public Well Distance from well \( \sum_{\text{Types}} \) feet  System Type: \( \sum_{\text{Types}} \) To \( \sum_{\text{Types}}	
(In accordance with Table V a)  Owner must contact Health Department 6 months prior to expiration for permit renewal.	
This system has been installe	ed 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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PERMIT CONDITIONS:	Samuel Manager in a contract Data 1001
<ol> <li>Performance:</li> <li>Monitoring:</li> </ol>	System shall perform in accordance with Rule .1961. As required by Rule .1961.
III. Maintenance:	As required by Rule .1961. Other:
	Subsurface system operator required? Yes \( \subseteq \text{No } \subseteq \)  If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:	
V. Other:	
Following are the specifications for the sewage disposal system on the above captioned property.	
Type of system:	Conventional Other WM 1. Owin 4 Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons
Subsurface Drainage Field	No. of exact length width of depth of ditches feet ditches feet ditches feet ditches
French Drain Required	
	gent Qu LAM Date 11-09.07
Authorized State A	gent fu Date 11-07.07