## Harmet County Department of Public ...alth 19604

Name: (owner)   Scattles   Nitrification Line   Expansis   PROPERTY (OCATION: 572 1/452   LOT # 3    System Installer:   Soundly Batter   Registration #   Registration #    Bazement with plumbing:   Garage   Number of Bedrooms   4    Type of Water Supply:   Community   Public   Well Distance from well   feet    Types of Water Supply:   Types Y 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 North Carolina General Statutes, hides for Sewage Treatment and Dioposal, and all conditions of the Improvement Permit and Construction Authoritation.    PERMIT CONDITIONS:   System shall perform in accordance with Rule .1961.    Performance:   System shall perform in accordance with Rule .1961.    Nontrolling:   As required by Rule .1961.	PERMIT # 24124	Operation Permit	
Name: (owner) Scattles House SubDIVISION Janothan Liga LOT # 3  System Installer: Londy Butter Supply: Garage Mumber of Bedrooms Type of Water Supply: Community Public Well Distance from well feet Types V and VI Systems expire in 5 years.  Owner must contact Health Department 6 months prior to expiration for permit renewal.  This years has been installed in compliance with applicable North Carolina General Statutes, holes for Sewage Treatment and Gioposal, and all conditions of the Improvement Permit and Construction Authorization.  PERMIT CONDITIONS:  I. Performance: System shall perform in accordance with Rule .1961.  II. Performance: System shall perform in accordance with Rule .1961.  II. Monitoring: As required by Rule .1961.		New Installation Septic Tank Repair Nitrification Line	☐ Expansion
Name: (owner)    System Installer:   Condy Buttern   Registration #			
System Installer:	Name: (owner) Scottlee Homes		# 3
Basement with plumbing: Garage Number of Bedrooms Type of Water Supply: Community Public Well Distance from well feet 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 North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.  PERMIT CONDITIONS:  I. Performance: System shall perform in accordance with Rule .1961.  As required by Rule .1861.			
Type of Water Supply:		<u>4</u> °	
System Type:		Distance from well feet	
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Subsurface system operator required? Yes No I If yes, see attached sheet for additional operation conditions, maintenance and reporting.  IV. Operation:  V. Other:	II. Monitoring: As required by Rule .1961.  III. Maintenance: As required by Rule .1961. Other:  Subsurface system operator required? Yes If yes, see attached sheet for additional operator.  V. Other:	No  ation conditions, maintenance and reporting.	
Following are the specifications for the sewage disposal system on the above captioned property.	Following are the specifications for the sewage disposal system on the	above captioned property.	llan-
		7 DE C 19 19 19 19 19 19 19 19 19 19 19 19 19	gallons
Subsurface No. of exact length of exact length of each ditches feet ditches feet ditches feet ditches feet ditches length of depth of dept		1 (0)	inches
French Drain Required: Linear feet	0		
Authorized State Agent, Super Maria R.S. Date 12/11/2007	and.	RS 12/1/2007	