HTE#07-5-18510122 Ha	rnett County	Department of	Public Health	21065
PERMIT # <u>_24401</u>	ิ พ	Operation Permit ew Installation Septi PROPERTY LOCATION: 2007	c Tank 🔲 Repair 🗹	Nitrification Line 🛛 Expansion
Name: (owner) <u>JACob JJessica Da</u>	(to)	SUBDIVISION Skein	non Prices	LOT # 7
System Installer: ADCOCK Excours	For	Registration #		
Basement with plumbing: 🗆 Garage 🗹 Numb	er of Bedrooms <u>3</u>			
Type of Water Supply: 🗆 Community 🗹 Public 🗆 Well Distance from well feet				
System Type: <u>25% lbootnes (Accepted) Type II &amp; Bring</u> (In accordance with Table V a) Where must contact Health Department 6 months prior to expiration for permit renewal.				
(In accordance with Table V a)	E Hwy 400		te o montils 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, an	nd all conditions of the Improvement I	Permit and Construction Authorization.
* FUIL STORAGE ON		$\backslash$		
DRAIN LENES. * NEEDS WI for	wet me	A		
* NEEDS WIL FOR				
Stred to BR 10				
off of septic lines.	a f	- All and -	$\backslash$	
	1 2 5		$\langle \cdot \rangle$	
* Home Had Foundation Drazins, THER were \$ 10 00 10 10 10 10 10 10 10 10 10 10 10				
* Home Had Foundation is is is is in the second states in the second sta				
DUG UP IN OUR SUSTAN				
O TO BY BY PLAT				
PPT 55' biz				
	at 4 47	55	I I	
win to when the go				
SHERMAN PIDES DREVE				
PERMIT CONDITIONS:		Times DATIE	<b>_</b>	
I. Performance: System shall perform in accor	dance with Rule .1961.			
II. Monitoring: As required by Rule .1961.				
III. Maintenance: As required by Rule .1961. 0				
Subsurface system operator re If yes see attached sheet for	•	litions, maintenance and report	ng.	
IV. Operation:		·····, ·····		
V. Other:				
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: 🗆 Conventional 🗹 Other <u>25% pervices</u> gallons Pump Tank: gallons Pump Tank: g				
Subsurface No. of	exact length		idth of	depth of
Drainage Field ditches <u>Z</u>	of each ditch _/	20 feet di	tches <u>3</u> feet	ditches $\underline{28}$ inches
French Drain Required: Linear feet				
Authorized State Agent pmese Markant & Kosts Date Date				
Authorized State Agent pmesc / Ankant Date Date				
V				