HTE# 07-5-18756

Har..... County Department of Public alth 19664

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PERMIT # 2413	8	Operation Permit						
		Mew Installation Septic Tank Repair Mitrificati	on Line Expansion					
PROPERTY LOCATION: 5R 1429								
Name: (owner)	aynor Builders	SUBDIVISION Dextert: eld	LOT # 46					
System Installer:	Four Secrons	Registration #						
Basement with plumbin		4						
Type of Water Supply: Community Public Well Distance from well								
System Type: 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	d in compliance with applicable Morth Carolina General Sta	tutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Cor	estruction Authorization					
inis system has been histane	to in compliance with applicable north caronna deneral sta	tutes, notes for sewage freatment and disposal, and an conditions of the improvement retinic and con	SELECTION AUDIONIZATION.					
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PERMIT CONDITIONS:								
I. Performance: System shall perform in accordance with Rule .1961.								
II. Monitoring: III. Maintenance:	As required by Rule 1961.							
III. Haintenance.	As required by Rule .1961. Other:							
	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 Comp to E2 Flow Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons								
Subsurface No. of exact length width of depth of								
Drainage Field	ditches of each d							
French Drain Required:	Linear feet		55					
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Authorized State Agent wife Main (1.). Date 2/29/2008								