HTE# <u>() 7.5</u>	150-18840R H	arnett County	Departmen	nt of Publ	ic Health	19674	
PERMIT # 19	672	-	Operation P			•	
Name: (owner)	Cumberland H Tell BROWN	ione)	ew Installation Æ PROPERTY LOCATIOSUBDIVISION	Septic Tank N: No 27 Aurel	valles	Nitrification Line	□ Expansio
Basement with pla	ımbing: □ Garage 🖾 Num	her of Bedrooms 3	Registration	#			
Type of Water Su	ooly: 🗌 Community 🔣 Publ	C Wall Distance	from well 55	feet			
(In accordance with	to Climber Unch	4 III	Types V	and VI Systems exp	ire in 5 years.		
•	,		must contact Health D				
This system has been i	nstalled in compliance with applicable North	Carolina General Statutes, Rules	for Sewage Treatment and	Disposal, and all conditio	ons of the Improvement I	ermit and Construction Aut	horization.
		sed C	92				
PERMIT CONDITIONS: I. Performance:	(wtem shall perform in occur-						
II. Monitoring: III. Maintenance:	System shall perform in accorda As required by Rule .1961. As required by Rule .1961. Othe Subsurface system operator requi If yes, see attached sheet for ad	r red? Yes 🗆 No 🖄	ns, maintenance and r	eporting.			
V. Operation:				. 3			_
. Other:							-
ollowing are the spec ype of system: ubsurface rainage Field	ifications for the sewage disposal s Conventional Dother C No. of ditches	exact length	Size of tank:	width of		ump Tank:	gallons
ramage rieio rench Drain Required:			feet	ditches		ditches 12-	inches
uthorized State Ac	O > 1	feet 2					mates