HTE# 07-5-19011	Har t County Department of Public Palth 20	0040
PERMIT # 24431	Operation Permit	
	New Installation Septic Tank Repair Nitrification I	Line Expansion
	PROPERTY LOCATION: SR1915 / LAWIS CH RS	
Name: (owner) Homen FI	SUBDIVISION	LOT # _/
System Installer: Honea F	Wimber of Bedrooms Registration # 747	
Basement with plumbing: Garage Type of Water Supply: Community	Wumber of Bedrooms	
System Type: Conventum	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 rene	ewal.
This system has been installed in compliance with an	pplicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Constructi	ian Australian
This special has been instance in complaine that ap		on Authorization.
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	SRI415 RANJOCHRO	
PERMIT CONDITIONS:		
I. Performance: System shall perfor II. Monitoring: As required by Rul	orm in accordance with Rule .1961.	
III. Maintenance: As required by Rul		
	operator required? Yes No	
IV. Operation:	ed sheet for additional operation conditions, maintenance and reporting.	
V. Other:		
Following are the specifications for the sev	wage disposal system on the above captioned property.	
Type of system: Conventional	Other gallons Pump Tank: gallons	gallons
Subsurface No. of Drainage Field ditches 4	exact length width of depth of	
Drainage Field ditches 4 French Drain Required:	of each ditch <u>120</u> feet ditches <u>5</u> feet ditches	ZG" inches
Authorized State Agent am	es Marshanters Date 6-6-08	,