HTE# 08. 500-19232R

Harnest County Department of Public ...alth 19699

PERMIT # 24478

Operation Permit

TENIII #	operation remit	
	New Installation Septic Tank Repair Nitrifica	tion Line Expansion
	PROPERTY LOCATION: NC 27	
Name: (owner) Wynn Conid	SUBDIVISION TINGER POINTE	LOT # <u>\&</u> \
System Installer: 2x->case 5'to Vev.	Registration #	
Basement with plumbing: Garage Number of Bedrooms	5 3	
Type of Water Supply: ☐ Community ☑ Public ☐ Well System Type: _ £. 2	Distance from well feet 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 perm	it renewal.
This system has been installed in compliance with applicable North Carolina General St	tatutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and C	onstruction Authorization.
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90/ 25% Reps. R		(
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51).		•
PERMIT CONDITIONS:		telines As shown
I. Performance: System shall perform in accordance with Rule	e. 1961. by Uzna	Const
II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other:		
Subsurface system operator required? Yes	No 🗆	
If yes, see attached sheet for additional oper		
IV. Operation:		
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V. Other:		
Following are the specifications for the sewage disposal system on the above captioned property.		
Type of system: Conventional Other 2-25	Size of tank: Septic Tank: 1000 gallons Pump T	ank: gallons
Subsurface No. of exact len		. /
Drainage Field ditches of each o	ditch 225 feet ditches feet ditches	s inches
Linear leet		
Authorized State Agent	Date 04.02-0	18
Authorized State Agent	vate	