HTE# 08-500	- 193097- H ett County Department of Pub Health	20636	
PERMIT # 252			
	Mew Installation 🖾 Septic Tank 🗆 Repair 🔊 Nitr	ification Line 🗆 Expan	sion
	Blackwell Homes Subdivision Woodshine		_
		LOT # 22	3
	O. S7a.: cle\accidenced Registration #		
Type of Water Supply:	□ Community ☑ Public □ Well Distance from well Loo feet		
System Type:	Types V and VI Systems expire in 5 years.		
(In accordance with Ta	ble V a) Owner must contact Health Department 6 months prior to expiration for	permit renewal.	
This system has been installed	ed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit	and Construction Authorization.	
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14.	(20		
	35	\rightarrow	
	12 4		
	75)	
	125'		
PERMIT CONDITIONS:			_
I. Performance:	System shall perform in accordance with Rule .1961.		
II. Monitoring: III. Maintenance:	As required by Rule .1961. As required by Rule .1961. Other:		
	As required by Rule .1961. Other: Subsurface system operator required? Yes No IS		
IV. Operation:	If yes, see attached sheet for additional operation conditions, maintenance and reporting.		
Tr. operation.			
V. Other:			
Following are the spec	ifications for the sewage disposal system on the above captioned property.		
	fications for the sewage disposal system on the above captioned property. Conventional Other C 2 F O gallons Pur		llons
Subsurface Drainage Field	No. of exact length width of detaction of each ditches feet ditches feet ditches	epth of tches 181-24 inches	
French Drain Required:		inches inches	
		0	THE OWNER OF THE OWNER OWNE
Authorized State Ag	gent Date 03:23	21	