HTE#<u>08-5-20635</u>

H ett County Department of Pub Health

20353

PERMIT # 24948

Operation Permit

operation remit
New Installation X Septic Tank Repair Nitrification Line Expansion
PROPERTY LOCATION: TRUELOVE RD
Name: (owner) Scott LEE HOMES INC SUBDIVISION JONATHAN RIOGE LOT # 15
System Installer: RANDY BATTEN Registration #
Basement with plumbing: Garage Number of Bedrooms
Type of Water Supply: Community Public Well Distance from well 100 feet
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 in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
280' 1500842 100 100 100 100 100 100 100 1
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PERMIT CONDITIONS:
I. Performance: System shall perform in accordance with Rule .1961.
II. Monitoring: As required by Rule .1961.
III. Maintenance: As required by Rule .1961. Other:
Subsurface system operator required? Yes \(\square\) No \(\square\)
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:
V. Other: Lines & TANKS CHECKED ON 11 2008 By OT. Pump & ALARM STILL TO BE CHECKED
Following are the specifications for the sewage disposal system on the above captioned property.
Type of system: Conventional Other Punk To E.Z. Flow Septic Tank: 1000 gallons Pump Tank: 1000 gallons
Subsurface No. of exact length width of depth of
Drainage Field ditches 2 of each ditch 90 feet ditches 3 feet ditches 24-28 inches
French Drain Required: Linear Section Control of Carlot United Sec
Trends stain requires. A before the
Authorized State Agent Date 3 10 09