	ounty Department of Public Health	20769
PERMIT #_2492	Operation Permit	
C	🛨 New Installation 🔁 Septic Tank 🔲 Repair 🕩	Nitrification Line 🗆 Expansion
-	1,26	
Name: (owner) AQ Contracting	SUBDIVISION CONSER MA	LOT # 45
System Installer: D. S. F. W. M.	Registration #	
Basement with plumbing: 🗆 Garage 🗸 Number of Bedrooms		
Type of Water Supply: Community Public Well System Type:	Distance from well feet	
(In accordance with Table V a)	Owner must contact Health Department 6 months prior to expirat	ion 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.

