HTE# 09-500-23218 Harnest County Department of Public ealth 21179
PERMIT # 25776 Operation Permit
New Installation Septic Tank Repair Nitrification Line Expansion PROPERTY LOCATION: 100 C
Name: (owner) 5 th Homes SUBDIVISION Yorkshire Claration LOT # 139
System Installer: Ted 30000 Registration # Basement with plumbing: Garage Number of Bedrooms
Type of Water Supply: Community Public Well Distance from well feet System Type: Quick Y 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.
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1 ST' White Copie
Power System April
PERMIT CONDITIONS:
I. Performance: System shall perform in accordance with 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:
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other Conventional South Conventional South Conventional Conve
Subsurface No. of exact length width of depth of
Drainage Field ditches of each ditch feet ditches feet ditches inches inches
Authorized State Agent Date 215.2010