HTE# 11-5-26791

Ha...ett County Department of Public Health

PERMIT # <u>265</u> 5	Operation Permit 2:	2033
	New Installation 🔀 Septic Tank 🕱 Nitrification Line 🗆 Rep	air 🗆 Expansion
Names (assumes)	PROPERTY LOCATION: Marks Ro	
Name: (owner)		.0T # <u>\</u>
Basement with plumbing		
Type of Water Supply:	□ Community Public □ Well Distance from well <u>160</u> feet	
System Type: (In accordance with Tab	Types V and VI Systems expire in 5 years. Owner must contact Health Department 6 months prior to expiration for permit renewa	
Owner mast contact realth bepartment o 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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	137	
	LCXXXXXXX DR	
PERMIT CONDITIONS: I. Performance: 5	System shall perform in accordance with Rule .1961.	
II. Monitoring:	As required by Rule .1961.	
	As required by Rule .1961. Other:	
ı	f yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
	D-Box 🗆 Pump 🗆 Alarm 🗆 H20Line 🗆	PWR Line
Following are the specific Type of system: Co	rations for the sewage disposal system on the above captioned property. Nentional Other CHRIBER CRITICAL Septic Tank: 1000 gallons Pump Tank:	_ 36
	nventional Other Chamber Court Septic Tank: 1000 gallons Pump Tank: lo. of exact length width of depth of	gallons
Drainage Field d	litches 1 of each ditch 200 feet ditches 3 feet ditches 221-3	36 inches
French Drain Required:	Linear feet	
Authorized State Ager	RESTANDANCE TO LIKE THE PARTY OF TH	