HTE# 12-5-2	18670	larnett Count	y Department	of Public H	lealth	
PERMIT # <u>2711</u>	1		Operation Per	mit		22387
ΓΕΝΙΠ # <u>ΣΠΤ</u>		M	New Installation	Septic Tank	Nitrification Line	Repair 🗆 Expansion
			PROPERTY LOCATION:	Tingen Ro		— -/F
Name: (owner)	Stancil Buil	des	PROPERTY LOCATION:_ SUBDIVISION _ <i>f _ t</i>	tons Point		LOT # / Y 6
System Installer:	- · · · · · · · · · · · · · · · · · · ·	ldes.	Registration #			
Basement with plumbin	-	mber of Bedrooms	<u>3 </u>			
Type of Water Supply:	☐ Community ☐ Pul	blic 🗆 Well Dista	ance from well			
System Type:			······································	d VI Systems expire in	•	
(In accordance with Ta	able V a)	Own	er must contact Health Depa	rtment 6 months pric	or to expiration for permit	renewal.
This system has been install	ed in compliance with applicable No	rth Carolina General Statutes, Ru	ules for Sewage Treatment and Disp	osal, and all conditions of	the Improvement Permit and Cor	struction Authorization.
PERMIT CONDITIONS:			Pamp Repair How - The type The ty	10		
I. Performance:	System shall perform in acc	cordance with Rule .1961.				
II. Monitoring:	As required by Rule .1961.					
III. Maintenance:	As required by Rule .1961.	Other:	,			· · · · · · · · · · · · · · · · · · ·
	Subsurface system operator					
	If yes, see attached sheet f	or additional operation o	onditions, maintenance and	reporting.		
IV. Operation:						
V. Other:						
	D-Box 🗆	Pump 🗆 _	Alarm		H20Line 🗆	PWR Line
Following are the spec Type of system: Subsurface	No. of	E ヱ F /o い exact length		width of	depth o	nk: gallons
Drainage Field	ditches 2	of each ditch _	75 feet	ditches $\underline{\mathcal{J}}$	feet ditches	<u> 24-36</u> inches
French Drain Required	•	Linear feet				