| HTE# 12-5-28834 Har | ett County | Department of P | ublic Health | |
|--|-------------------------------|--|---|-----------------------------|
| PERMIT # 26847 | • | Operation Permit | , | 22456 |
| TEMM // | ₽ N | ew Installation Sentic | ank 🗹 Nitrification Line 🗆 | |
| | | PROPERTY LOCATION: Social | 755 Silves HALRA RI | |
| Name: (owner) STANCY Buildey | INC | SUBDIVISION Howter | s PT | LOT # 2 |
| System Installer: STANKEI Builde | ^ | Registration # | | |
| Basement with plumbing: Garage Mumber | | | | |
| Type of Water Supply: Community Public | | te from well feet | | |
| System Type: 25% 176 Sucsion 5,370 | - Type II G | Types V and VI Syste | ms expire in 5 years. | |
| (In accordance with Table V a) | Owner | must contact Health Department 6 | months prior to expiration for perm | nit renewal. |
| This system has been installed in compliance with applicable North Car | olina General Statutes. Rules | for Sewage Treatment and Disposal, and a | Il conditions of the Improvement Permit and C | Construction Authorization. |
| 13" | 23 O ARIVE | Red SAD | 712 | ý |
| PERMIT CONDITIONS: | | | | |
| I. Performance: System shall perform in accordanII. Monitoring: As required by Rule .1961. | ce with Rule .1961. | | | ĕ |
| III. Maintenance: As required by Rule .1961. Other | : | | | |
| Subsurface system operator requi | | | | |
| If yes, see attached sheet for add | litional operation cond | litions, maintenance and reporting. | | |
| IV. Operation: | | | | |
| V. Other: | | | | |
| □ D-Box □ | Pump 🗆 | Alarm 🛚 | H20Line 🗆 _ | PWR Lin |
| Following are the specifications for the sewage disposal structure of system: Conventional Other 25 Subsurface No. of Drainage Field ditches | stem on the above ca | aptioned property. System Septic Ta width | nk: 1000 gallons Pump To | ank: gallons |

Authorized State Agent & Markets

Date 9-25-12