HTE# 12-5-3	19710 Har	nett County D	Department of Pub	lic Health	
PERMIT # 27)		<u>0</u>	peration Permit		22757
		PRO	Installation 🗵 Septic Tank OPERTY LOCATION: <u>Care</u> ce	Nitrification Line Ses Chine Ro	Repair 🗆 Expansion
Name: (owner) System Installer: _			UBDIVISION <u>C702.6.55</u> Registration #		LOT # <u>\ \ </u>
	oing: Garage Number v: Community Public		om well 100 feet		
System Type: (In accordance with T	Table V a)	Owner mus	Types V and VI Systems es t contact Health Department 6 mon		renewal.
This system has been insta	lled in compliance with applicable North Card	lina General Statutes, Rules for S	sewage Treatment and Disposal, and all condi	tions of the Improvement Permit and Cons	struction Authorization.
			REAL COS		
		7/			
PERMIT CONDITIONS: I. Performance: II. Monitoring: III. Maintenance:	System shall perform in accordance As required by Rule .1961. As required by Rule .1961. Other: Subsurface system operator require If yes, see attached sheet for add	ed? Yes 🗆 No 🗀	maintanance and		
IV. Operation:			s, maintenance and reporting.		
V. Other:			Alarm		DWD ! :

French Drain Required: Linear feet

ditches

Type of system:

Conventional

Authorized State Agent

Subsurface

Drainage Field

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system:

Conventional Other Punk To E2 Frow

exact length

of each ditch <u>280</u>

feet

Date 12/19

depth of

ditches _

Septic Tank: 1000

width of

ditches _

gallons Pump Tank: 1000 gallons

__ inches