HTE# 12-5-2991812

## Ha tt County Department of Publ. .. lealth

		7	
PERMIT # 2736	3	Operation Permit	22500
			Nitrification Line  Repair Expansion
		PROPERTY LOCATION: How 82 - A	
Name: (owner) A	shlen LEE	SUBDIVISION	LOT #
	VEY JOHOJUN	Registration #	
Basement with plumbing:		3	
Type of Water Supply:	☐ Community ☐ Public ☐ Well	Distance from well feet	
System Type: 25%	WANULION System Ty	Types V and VI Systems expire in	
(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	n compliance with applicable North Carolina General Stat	utes, Rules for Sewage Treatment and Disposal, and all conditions of th	e Improvement Permit and Construction Authorization.
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	mir Id		
	OUT 191487		
PERMIT CONDITIONS:		1041	
	ystem shall perform in accordance with Rule s required by Rule .1961.	.1701.	
	s required by Rule .1961. Other:		
	ubsurface system operator required? Yes	No 🗆	
	yes, see attached sheet for additional opera	tion conditions, maintenance and reporting.	
IV. Operation: _			
V. Other:			
wat to be a second to the seco	_		
o	D-Box   Pump	□Alarm □	H20Line D PWR Line
Following are the specific	ations for the sewage disposal system on the	above captioned property.	A
		th Septic Tank: 160	gallons Pump Tank: gallons depth of
	lo. of exact leng	tch 60 feet ditches 3	feet ditches 18-716 inches
French Drain Required:	Linear feet		
	d	, 6	
Authorized State Ages	$()$ $M_{\circ}$	Date	4-3-13