HTE# 14-5-34120

Ha tt County Department of Publi ealth

23662

PERMIT # 28027

Operation Permit

PERMII # _200e		Installation 🕏 Septic Tank 🗏 Nitrification Line	Renair Fynancion
	PRO PRO	PERTY LOCATION: KENTUCKY DEDBY	LN
Name: (owner)	NYNH CONSTRUCTION SI		LOT # <u>33</u>
		Registration #	
Basement with plumbing			
		om well 100 feet	
System Type:(In accordance with Tab		Types V and VI Systems expire in 5 years. t contact Health Department 6 months prior to expiration for	nermit renewal
(III accordance with rat	le v a) Owner musi	t contact health bepartment o months prior to expiration for	permit renewal.
This system has been installed	in compliance with applicable North Carolina General Statutes, Rules for S	ewage Treatment and Disposal, and all conditions of the Improvement Permit	and Construction Authorization.
		Second 174 174 175 175 175 175 175 175 175 175 175 175	
PERMIT CONDITIONS:			
I. Performance:	System shall perform in accordance with Rule .1961.		
II. Monitoring:	As required by Rule .1961.		
III. Maintenance:	As required by Rule .1961. Other: Subsurface system operator required? Yes No		
	If yes, see attached sheet for additional operation condition	ns maintenance and reporting.	
IV. Operation:	To fee, see attached sheet for additional operation condition	s, manifestance and reporting.	
V. Other:			
		Alarm 🗆H20Line 🗆	PWR Line
	Conventional R Other EZFLOW		wa Tanki gallans
Type of system:		width of	mp Tank: gallons
Drainage Field	disches 4 of each ditch 60	feet ditches feet d	lepth of I8-24 inches
French Drain Required:	Linear feet	ACTION AND ACTION ACTION AND ACTION ACTION AND ACTION AC	
		-1 1-	
Authorized State Ag	ent Revis	Date 6 17 /5	