HTE# 17-5-41843 Hai t County Department of Public Palth 24170	
PERMIT # 29593 Operation Permit	
New Installation Septic Tank Nitrification Line Repair Expans	ion
Builder's Brand D. Cummings PROPERTY LOCATION: 11441 NC 27 W.	IUII
Name: (owner) Robert & Karen Stone SUBDIVISION LOT #	
System Installer: Odis Strickland Registration #	1
Basement with plumbing: Garage Number of Bedrooms 3	
Type of Water Supply: Community Public Well Distance from well Feet	
System Type: 25% reduction 575. Types V and VI Systems expire in 5 years. (In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal.	
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This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.	
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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 \(\sime\) No \(\sime\) If yes, see attached sheet for additional operation conditions, maintenance and reporting.	
IV. Operation:	
V. Other:	
□D-Box □Pump □Alarm □H20Line □PWR	Line
Following are the specifications for the sewage disposal system on the above captioned property. Type of system: Conventional Other gallons Pump Tank: gallons P	one
Subsurface No. of exact length width of depth of	NII2
Drainage Field ditches 3 of each ditch 100 feet ditches 3 feet ditches 12 inches	
French Drain Required: Linear feet	

03/09/2018 Authorized State Agent_ Date _