HTE#08-5-21260

H ett County Department of Pub... Health

20563

PERMIT # 2512)

Operation Permit

	New Installation Septic Tank Repair N	Nitrification Line 🗆 Expansion
m	PROPERTY LOCATION: Hwy H2	
Name: (owner) DRANDI I KONNE	LL SUBDIVISION DUNCAN IND. PK	LOT # <u>\</u>
	Registration #	
Basement with plumbing: Garage Number of B		
Type of Water Supply: Community Public		
System Type:	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 f	or permit renewal.
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 Per	rmit and Construction Authorization.
BUILDING TO DORINGIESS	15 ESMT	PAIR LEA
All. WATERLENES CROSSING SUPPLY SIEEVED to 10' of W/L 6-12-09.		
PERMIT CONDITIONS:		
I. Performance: System shall perform in accordance w	rith Rule .1961.	
II. Monitoring: As required by Rule .1961.		
III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required?	V □ N- M	
	nal operation conditions, maintenance and reporting.	
IV. Operation:	nai operation conditions, maintenance and reporting.	
T. Operation.		
V. Other: TANKS & DOAINFIELD CH STILL TO BE CHECKED.	PUMP ! ALARM STILL TO BE CHECKED	O 20' EASEMENT
Following are the specifications for the sewage disposal syster	1.6	
Type of system: Conventional Other Owner	To EZ From Septic Tank: 1000 gallons	Pump Tank: 1000 gallons
Subsurface No. of e	exact length width of	depth of
Drainage Field ditches 3	of each ditch 90 feet ditches 3 feet	ditches 28-18 inches
French Drain Required:	t	
Authorized State Agent	85 Date 6 22 0°	Ä