

PERMIT # NA

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: 416 JERNIGAN ROAD (S21801)

Name: (owner) MARY ELAINE MANNARD SUBDIVISION _____ LOT # _____

System Installer: SHANE McDONALD / EASTERN SEPTIC Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

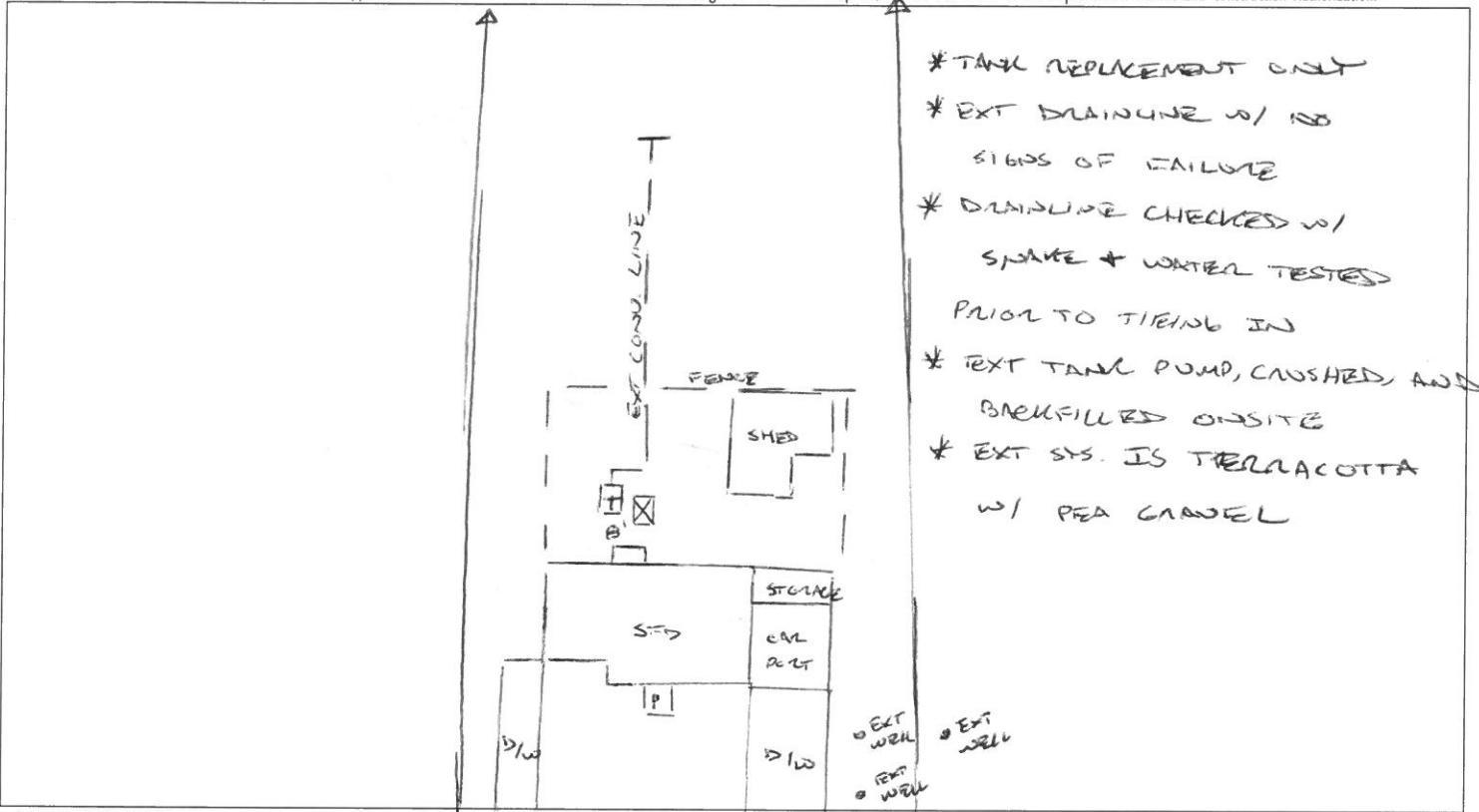
Type of Water Supply: Community Public Well Distance from well NA feet

System Type: EXT CONVENTIONAL SYS. T/A 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.

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.



* TANK REPLACEMENT ONLY
 * EXT DRAINAGE w/ NO SIGNS OF FAILURE
 * DRAINAGE CHECKED w/ SNAKE + WATER TESTED PRIOR TO TIEING IN
 * TEST TANK PUMP, CRUSHED, AND BACKFILLED ON-SITE
 * EXT SYS. IS TERRACOTTA w/ PEA GRAVEL

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 conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

D-Box Pump Alarm H2O Line PWR Line

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

Type of system: Conventional Other _____ Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface No. of exact length width of depth of
 Drainage Field ditches EXT of each ditch EXT feet ditches EXT feet ditches EXT inches
 French Drain Required: _____ Linear feet

Authorized State Agent [Signature] Date 10/14/2020