HTE# Repair	Ha tt County Department of Publi ealth 200	673
PERMIT # 25271	Operation Permit	
	☐ New Installation ☐ Septic Tank ☐ Repair ☐ Nitrification Lin	e 🗆 Expansion
	PROPERTY LOCATION: Cokes bury Red.	
Name: (owner))T #
	Tomy Coley Registration #	
Basement with plumbing: Garage Number of Bedrooms Garage Vublic Well Distance from well feet		
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 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.		
PERMIT CONDITIONS:	DI D	
I. Performance: Sys	stem shall perform in accordance with Rule .1961.	
	required by Rule .1961. Other:	
Sub	bsurface system operator required? Yes No	
IV. Operation:	yes, see attached sheet for additional operation conditions, maintenance and reporting.	
V. Other:		
	tions for the sewage disposal system on the above captioned property.	
Type of system: Conv Subsurface No.		gallons
	o. of exact length width of depth of tches feet ditches feet ditches	inches
French Drain Required:	Linear feet	
Authorized State Agent Super M. S. Date 5/27/2009		