

HTE# Repair

Harratt County Department of Public Health

24393

PERMIT # 29458

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: 570 Clayhole Rd. (SR 2007)

Name: (owner) Willie L. Spears, Sr. SUBDIVISION _____ LOT # _____

System Installer: Thomas Cooper Registration # _____

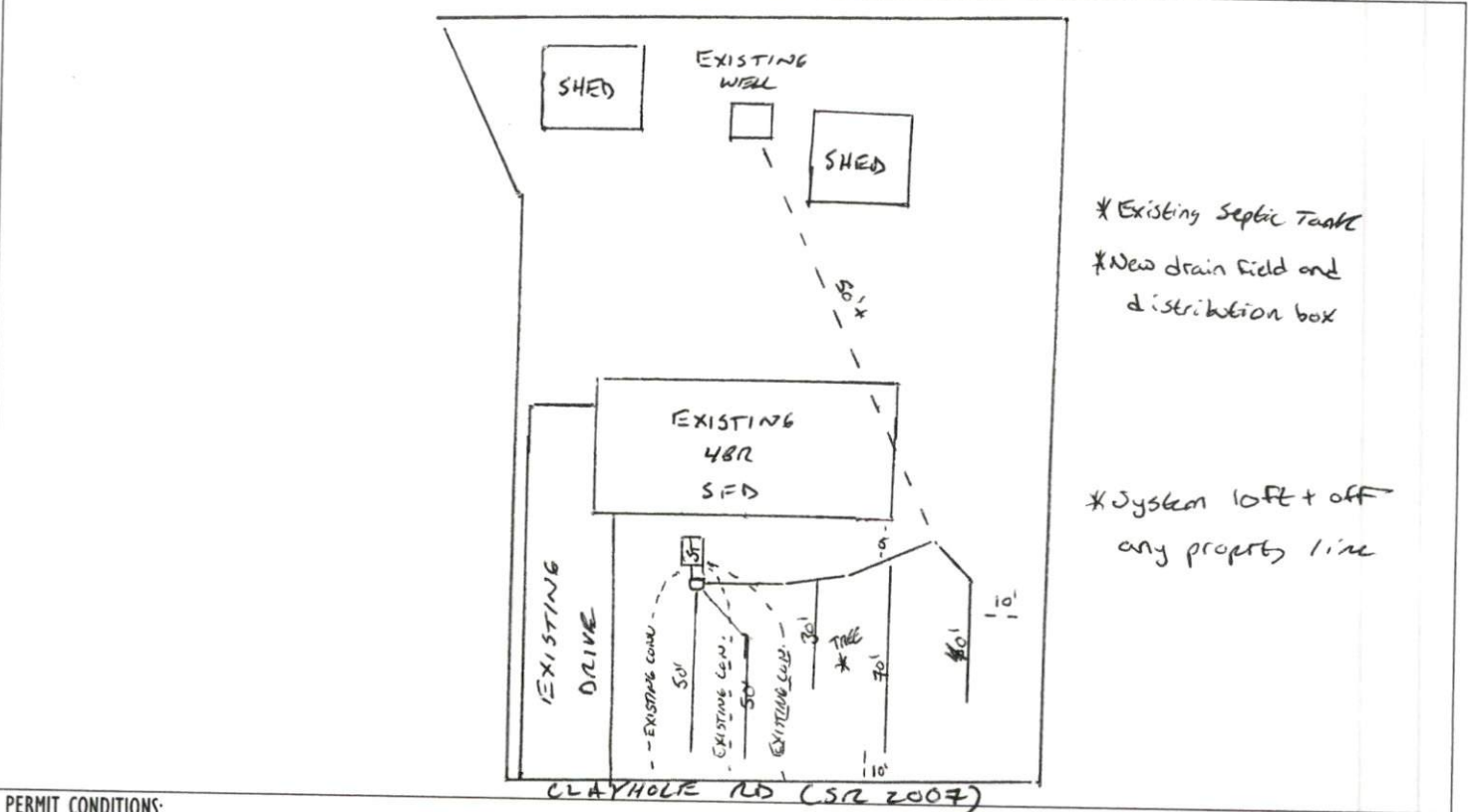
Basement with plumbing: Garage Number of Bedrooms 4

Type of Water Supply: Community Public Well Distance from well 50+ feet

System Type: 25% reduction Sys. III 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:

- 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 25% Reduction Chamber Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface No. of exact length 50, 50, 30 width of depth of

Drainage Field ditches 5 of each ditch 70, 40 feet ditches 3 feet ditches 24-30 inches

French Drain Required: _____ Linear feet TOTAL 240ft 30" on upper 2, 24" lower lines

Authorized State Agent [Signature] Date 05/03/2017