

HTE# Repair

Harris County Department of Public Health

23096

PERMIT # 27650

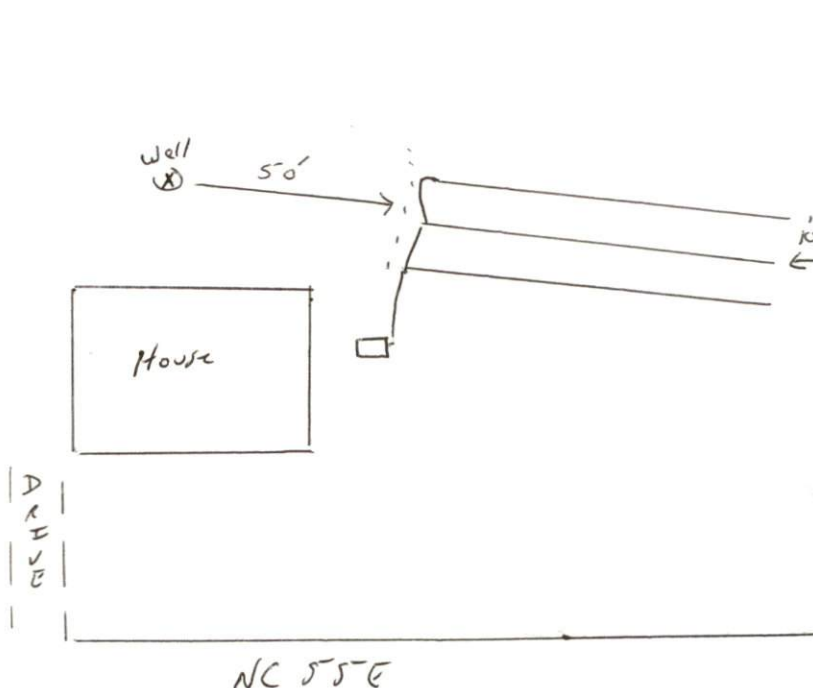
Operation Permit

☐ New Installation ☐ Septic Tank ☒ Nitrification Line ☒ Repair ☐ ExpansionPROPERTY LOCATION: 2566 NC 55EName: (owner) Sloan Griffin SUBDIVISION _____ LOT # _____System Installer: Sloan Griffin Registration # _____Basement with plumbing: ☐ Garage ☐ Number of Bedrooms 2Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well 50 feetSystem Type: III G 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 Quick 4 Chamber Septic Tank: Existing gallons Pump Tank: _____ gallonsSubsurface No. of exact length width of depth of
Drainage Field ditches 1 of each ditch 200 feet ditches 3 feet ditches 25-20 inches

French Drain Required: _____ Linear feet

Authorized State Agent Bryan McSwain, R.E.H.S.Date 3/6/2014