OPERATIONS PERMIT

Name: (owner) _LA Scottie Johnson_   ☒ New Installation   ☒ Septic Tank

Property Location: SR# _NC27_   ☐ Repairs   ☒ Nitrification Line

Subdivision _Longleaf Acres_   Lot # _41_

TAX ID#_____   Quadrant #_____

Contractor: _Southern Environmental&Soil_ Registration #_____

Basement with Plumbing: ☐   Garage: ☐

Water Supply: ☐ Well   ☒ Public   ☐ Community

Distance From Well: _50_ ft.

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

Type of system: ☒ Conventional   ☐ Other_____

Size of tank: Septic Tank: _1000_ gallons   Pump Tank: _____ gallons

Subsurface Drainage Field   No. of ditches _2_   exact length of each ditch _180_ ft.   width of ditches _3_ ft.   depth of ditches _12_ in.

French Drain: _____ Linear feet

PERMIT NO. _17353_

Date: _8-23-2000_

Inspected by: _JTW ARS_
Environmental Health Specialist

Road

3BR 28x64

Rd

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