HTE# 07-5-17144

## Harnest County Department of Public nealth 19328

PERMIT # 23873	Operation Permit
	New Installation 🖂 Septic Tank 🗆 Repair Mitrification Line 🗆 Expansion
	PROPERTY LOCATION: DARKWOOD DR
Name: (owner) 51m	MY RICHARD OWSE SUBDIVISION ANDERSON CREEK LOT # 24
System Installer:	
Basement with plumbing:	
Type of Water Supply:	Community Public Well Distance from well 50 feet
System Type:	Types V and VI Systems expire in 5 years.
(In accordance with Table V	Owner must contact Health Department 6 months prior to expiration for permit renewal.
This system has been installed in co	mpliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.
This system has been histance in co	instruction approaches to the improvement verification and organization of the improvement verification.
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	POND
	werz !
	SETBACK
	200
	28 × 62
	25% REDUCTION R
	IZ FFONCE / V
	U WELL II
	SETENCY /
PERMIT CONDITIONS:	
	m shall perform in accordance with Rule .1961.
The state of the s	equired by Rule .1961.
	equired by Rule .1961. Other:
	urface system operator required? Yes 🗆 No
	s, see attached sheet for additional operation conditions, maintenance and reporting.
IV. Operation:	
V. Other:	
r. ouler.	
Following are the specification	ns for the sewage disposal system on the above captioned property.
Type of system:   Conve	
Subsurface No.	
Drainage Field ditch	
French Drain Required	Tinear Beet
	The state of the s
Authorized State Agent	B