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## Har.... County Department of Public alth 19319

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1#23837	Operation Permit	

PERMIT # 2303	Operation Fermit		
	New Installation Septic Tank	Repair Nitrification Line  Ex	pansion
	PROPERTY LOCATION: 17211		
Name: (owner) Clyde Catterna	SUBDIVISION DRT	LOT # 2	C
System Installer: No. Hic Prog	Registration #	201 11	
Basement with plumbing: Garage Number of Bedrooms			
Type of Water Supply:   Community   Public   Well	Distance from well feet		
System Type: E2 Flow	Types V and VI Systems expire in	5 years.	
(In accordance with Table V a)	Owner must contact Health Department 6 months prio	A	
Paraceter and contraction of the		S SAS AND PORTER OF MANY TO A PROPERTY OF THE	
This system has been installed in compliance with applicable North Carolina General St.	natutes, Rules for Sewage Treatment and Disposal, and all conditions of	the Improvement Permit and Construction Authorization.	
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12'		E, 112 Y	51
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PERMIT CONDITIONS:			
I. Performance: System shall perform in accordance with Rule	2 .1961.		
II. Monitoring: As required by Rule .1961.			
III. Maintenance: As required by Rule .1961. Other:			
Subsurface system operator required? Yes $\Box$			
If yes, see attached sheet for additional open	ation conditions, maintenance and reporting.		
IV. Operation:			
V 04			
V. Other:			
Following are the specifications for the sewage disposal system on the	e above cantioned property		
	Size of tank: Septic Tank:	gallons Pump Tank: (ON)	gallons
Subsurface No. of exact len		depth of	— 8 <sup>a.10113</sup>
Drainage Field ditches of each of	ditch 300 feet ditches		nches
French Drain Required: Linear feet		-	
, , ,	0		
Authorized State Agent	Date	5:21-07	